

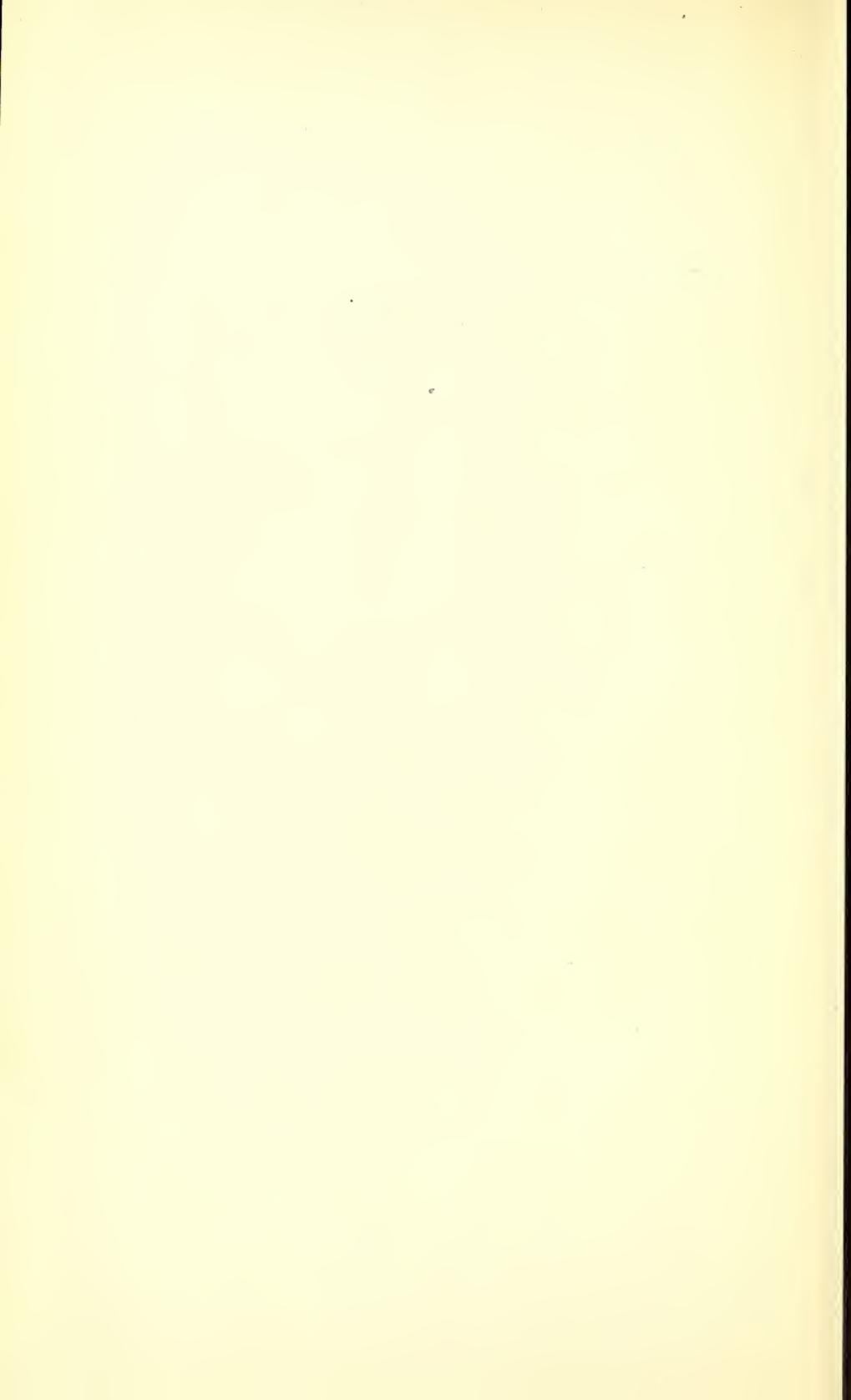
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Volume XVIII

MARCH, 1924

No. 1

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35TH ANNIVERSARY REUNION OF THE CLASS OF 1889

Progress for the Haines Library Fund

A reunion of the class of 1889 was held February 19, 1924, the thirty-fifth anniversary of graduation. Nine Chicago members entertained ten from out-of-town at a dinner at the Palmer House where the faculty dinner was held at the time the class graduated. Of the 138 original members of the class, forty-seven are known to have died, eighteen cannot be located, and seventy-three are living, most of them being in active practice.

Each year on the 19th of February the Chicago members of the class will entertain as many out-of-town members as can get together.

It was suggested that the class of '89, aside from what may have been done as individuals, make a contribution as a class to the Walter S. Haines Library Fund. Dr. John R. Minahan open with five dollars, and each present came in with a like amount. It was decided to give the absent members of the class an opportunity to participate before turning over the fund to the treasurer of the Alumni Association.

Those present were: Almerin W. Baer, Hayden S. Barnard, Carl M. Beebe, F. S. J. Bessette, E. B. Coolley, Garrett Fitzgibbon, S. Greenspahn, P. B. Hayes, Wm. H. Lane, John J. Looze, John R. Minahan, I. D. Mishoff, Henry A. Norden, E. Perry Rice, John R. Roark, Herbert A. Robinson, W. P. Sherman, Harvey A. Tyler, and Geo. H. Weaver.

ORIGINAL

WALTER STANLEY HAINES

NORMAN BRIDGE

RUSH COMMENCEMENT—JUNE, 1923

The lives of some men are like poems with the quality of anthems. In his life, his personal traits and his career, Walter Haines was unique in the history of men. Born to a spirit of great industry, refinement and courtesy, these qualities were accentuated by his infirm health that continued through more than half a century of his life.

His invalidism, as is often the case, had a refining influence on his naturally fine qualities. He did not have consumption, as many people supposed. He had recurring attacks of some inflammation in one lung that left him between times in fair but not robust health. Naturally he had a mind of remarkable brilliancy. When an attack of his peculiar sickness knocked him down, his work was soon stopped—but when the attack was over, he resumed his work with his former energy.

His personality was so unusual that his habits and character make a profitable and fascinating study. He had many peculiarities that widely distinguished him from other men. Some of the peculiarities were amusing, some held valuable lessons for other people; substantially all of them did him credit, and many of them covered him with honor and glory.

He illustrated how true it is that all men are dominated by one strong and directing emotion which colors more or less all the other emotions of the mind—and which gives the general scope and substance of a man's character. An outstanding trait of his was his extreme and constant courtesy to others—his politeness to everybody. In this he was a model for all men and boys. It was the one and indispensable quality of a true gentleman—which is a sensitive regard for the rights and opinions of others, and for one's own self respect. It was a habit of his life that needed no prompting, and no watching. It colored his relations with all people, and it tinged with a refined glory his environment—men were ashamed to be rude or vulgar in his presence, and men as well as women admired him for the delicacy of his courtesy, his consideration for others. This quality was a pervading influence that touched everybody about him. In half a century of close and confidential friendship with him, I never heard him utter a rude or vulgar word; and he would have been incapable of the thing colloquially called swearing. Many good men, who in the ordinary currents of life are circumspect of speech and demeanor, yet under

great excitement and opposition are apt to break away and swear furiously or picturesquely. Not so Dr. Haines. Indignation he had, and showed at times, but always in language wholly decorous.

But he had an amazing fund of hyperbole and similar extravagance; as when he would propose to some epicurean friend a *gorge* on artichokes; or that if he had ten acres of land, he would surely plant eleven to asparagus. He had a fund of raillery on many sorts of subjects. He was a poor sailor, was often seasick when on troubled water, an experience he often had, for he trave'ed extensively. When he met on a stormy day some intimate lady friend who was also a bad sailor, he was likely to invite her to go with him immediately on an ocean voyage.

Some people on first acquaintance with him guessed that a part of his demeanor was affectation. But nothing was farther from the fact. This trait was genuine and constant. The greatest measure of his courtesy was bestowed on his mother, even when alone with her. He was a great admirer of his mother, and wished it had been possible for him to have known her when she was a little girl, she must have been so beautiful! He was punctiliously polite to the serving people in the house.

Some of his friends have remarked in him an excess of politeness at certain times. This was most notable when he was sick—indeed his intimates could usually tell when he was below his par of body by an effusiveness of his normally great politeness. There is no question that this constituted some lost energy in the business of life, and it was greatly inconvenient; but its recompense was in the essential nobility of the purpose which was back of it and always apparent.

His conversational powers were remarkable. He was a missionary to a lot of bashful and diffident people who suffer the pangs of grief because they cannot converse—they don't know how to talk, and there are a multitude of sufferers of this sort, whose lives and loves are much handicapped by this weakness; and some whose careers are retarded or ruined by it. They always stand in need of a friend who will lead them in ways of easy conversation; who will praise them as needed, who will give them comfort, gently ask them questions on the things they know about, and so help them to find their tongues and become able to converse. He was such a friend, and he was a benefactor of this sort to many people. He was a master in talk, especially small talk, and could prolong such a dialogue or monologue till his friend would forget his bashfulness, and actually seek a chance to get a word edgewise into the conversation.

His knowledge was broad and widely varied, and he could talk well on a great variety of subjects, but he never said sharp, cutting things, or smart things that would hurt other people. I have seen him many times start a timid lady or girl into an interesting con-

versation by adroitly complimenting the good taste of her gown or her hat. But he had no tendency to abrasive satire or joking in his conversation. His playfulness was always gentle and alluring. He would never have been quite capable of the startling humor of Robert Collyer.

Collyer was walking in the park one day, and saw a lady approaching whom he did not know, but who knew him. He lifted his hat as he passed her and said politely, "Thank you!" She stopped short and said, "Dr. Collyer, I don't see what you have to thank me for." He instantly retorted, "for wearing that beautiful warm-colored gown on this bleak morning"—and passed on. Dr. Haines would never have ventured on a joke like that.

Some people who knew him chiefly in his social, conversational times have imagined that he would be loquacious and long-drawn-out in his lecturing. But this did not occur. He had the power to concentrate when it was necessary and confine himself to essentials. When the bell rang to end the lecture, he stopped—and he had substantially finished his topic as intended.

Persistency, determination, steadfastness and continuity of purpose constituted one cardinal trait of his character.

He was a high-school graduate, but he did not attempt to get a college education of the usual sort. He early determined to make his career in scientific lines. He equipped himself in chemistry and physics as well as he could. Broken in health in the midst of his study at the Massachusetts Institute of Technology, where he had gone for his foundation work, he turned to the study of medicine as being the best avenue for his scientific bent, which would consist with his inclinations, and possible to his precarious health.

The Haines family-physician was a beloved veteran, and a homeopath, and he expected that Walter would go to a homeopathic college, and I believe the father and mother also expected this. But the youth himself had already fixed his mind on that sort of science that is as exact as possible; no "pathy" would satisfy him—and he had the fortitude to elect to attend the Chicago Medical College, later and now the medical school of the Northwestern University.

He entered the college and took the elementary branches the first year. It was soon found that in his chemistry he was extremely proficient, and he was soon set to quizzing the students on this subject. Two facts were shown by this situation; one was that he had a strong aptitude for the science of chemistry; the other that he had profited by his work at the Massachusetts Institute of Technology. Before the end of the year he was pressed into filling some of the chemistry lecture hours, and the following year he was made the permanent teacher of chemistry in the college

—occupying as a student a seat with the senior class, and then as a teacher on the platform of the lecturer. As a teacher he was painstaking in the extreme.

At this time came to him an experience connected with his teaching that lasted nearly through life: that was *stage fright* in the presence of an audience. It was severe at first, but gradually lessened as the years came and went, but never disappeared entirely. Within recent time he has told me that each year on his first appearance before a new class, he always felt a shaking of his knees at the beginning of the lecture.

This was a conserving influence on his development. The victim of stage fright is likely to be one who prepares well his mind beforehand for each lecture—not to do that would mean remissness in duty to the class—a thing that to this man was impossible. So this nervous affliction was a force constantly tending to improve his teaching both in method and substance.

Another useful influence came to him in that early time. He was a youth, and fastidious, and filled with ambition for excellence. He had to work and progress. He made a daily study of the subject of his teaching—a habit that, if possible, grew stronger with the years. And in middle life and after, he continued to grow in breadth intellectually.

That is the history of every man who begins thus to teach in a permanent position—provided he is young, has industry, honesty, high ambition for himself and his following. All that Walter Haines was in every particular.

From soon after his entry into Rush College he became one of a group of younger men in the teaching corps who worked steadily for raising the standard of medical education, both the conditions of admission to the college, the teaching in it, and the graduation from it. They had to work against the inertia and conservatism of some veteran seniors who had been greatly successful doctors, and had graduated many remarkable men who had become successful doctors. They had done this under the handicap of mostly poor preliminary education, short courses of study, and the amazing drag of the almost exclusive didactic method in a branch of knowledge that cried out for practical teaching—for laboratory and clinical work—more learning by doing of things.

Walter Haines was outstanding among those young men for his essential culture and finer scholarship. He helped powerfully toward the university affiliation; the acquisition of university methods and the growth into the remarkable consummation in medical study that is witnessed here today.

The affiliation reduced the college attendance, as was expected; it broke up the large classes; raised the standard of preliminary education, the conditions of admission—and the atmosphere of the work in general was altered and elevated.

Coming with the affiliation was the enlargement of the work of Dr. Haines by his giving lectures—especially on pharmacology—at the University as well as at the College. These changes although in some ways adding to his labors, were agreeable to him. They increased his usefulness and the dignity of his position. Rush College became with the affiliation a co-educational school to correspond with the University, and to justify common sense.

For many years of his most active life there was going on in the laboratory of Dr. Haines almost constantly, a chemical hunt for poisons in the organs of dead human bodies. It was a trying business to his health, for it meant confinement in a close room with bad air and bad odors. Undoubtedly his poison work sometimes brought on attacks of his lung trouble and so shortened his life.

The work was exacting. Much of it he had to do himself personally, for if he found poison he must testify about it in Court; and he must show that he had made and kept minute records of his work, and of the specimen from the moment he received it till the analysis was completed. He had to swear that the specimen had never left his personal custody unless it was in a sealed receptacle, or in his laboratory, with every opening sealed by devices that had never been broken except by himself.

He did first and last an enormous amount of this toxicological work. Up to a few years ago, I suspect that he had made a higher record numerically of such cases, analyzed, and testified about in Court, than any other man living or dead. Finally his health became so precarious that he nearly ceased this line of labor.

His clients were mostly the prosecuting attorneys of the counties where poisonings were suspected. So he was always a witness for the prosecution. He made many scores of railroad journeys to testify in such cases, sometimes long and fatiguing journeys. Not a few of these cases were tried at two or more times.

He was an ideal expert witness, and a great comfort to lawyers and judges, for he was exact, specific in testimony, as he was precise and scientific in his analyses.

He went into court with elaborate preparations. Nobody ever found him doing slipshod work of this or any other sort. He always had a full syllabus of what he had discovered, and what he was prepared to swear to. And, before he took the stand, he almost or quite invariably sought the defendant lawyer who was to cross-examine him, and to his surprise presented him with a copy of the syllabus. This courtesy was so unusual that it immediately disarmed the lawyer of any unfriendliness, and both pleased and surprised the judge—who sometimes afterward invited the doctor and the two lawyers to luncheon.

Dr. Haines was frequently retained in patent cases and other sorts of contest where wide knowledge of chemistry and physics

was required of the experts. In these cases he was often associated with other experts of national fame; and was pitted against other able experts on the opposite side of cases. Some of these cases were long-continued and passed through several courts on appeals, on re-hearing, or new trials, and some were in the Courts for years. Most of these involved large money elements, and all were of course hotly contested. He was fond of cases of this sort, for they often required extensive researches and experiments bearing on facts, and construction of chemical and physical questions. And he enjoyed association with his eminent colleagues. He enjoyed as well the not infrequent disputes with them. Such contests were mental experiences that were both refreshing and inspiring.

In later time he was for several years a member of the State Milk Commission of three members. This was a work he enjoyed, and he felt he was doing the community a useful service.

He bore an active and time-spending part in at least three of the laborious decennial revisions of the U. S. Pharmacopoeia. His knowledge of chemistry, pharmacology and toxicology would in any circumstances have made him a valuable member of the committee of revision. But his desire for simplicity and for the convenience of the prescribing doctor; and for the protection of the doctor as far as possible from mistakes in prescription writing—made him an especially useful member. Services of this sort he enjoyed giving for the public good, and for his interest in a piece of scientific work that he was anxious should be as perfect as possible.

He was one of the most *modest* and *unselfish* of men. He rarely told and positively never boasted of his achievements or attainments. He was one of the greatest toxicologists of the world, yet his nearest personal lay friends scarcely knew it, and what they did know of it to his credit they learned not from him, but from other people. Whenever, on the demand of friends, he did talk about these things, he seemed to fear that he might be under the rebuke of good taste, lest he should appear to be guilty of conceit—a thing of which he was wholly incapable.

In all his career as a teacher he was probably underpaid—and of course he knew it, but he was too modest and self-abnegating to demand more for himself. Yet in the college management if anyone ventured to belittle the work of his department, he was prompt to defend it, and the needs of the students for thorough work in chemistry, pharmacology and toxicology.

As a teacher he was superb, and he gave the best gift to his students, which is the rare capacity to think in terms of chemistry. He was profligate in time given in the chemical laboratory to the personal drilling of students in practical chemistry. His attitude toward the students was always one of great sympathy and affection.

He was in his personal expenditures frugal to a fault. He saved money, wore his old clothes—in which he always looked immaculately neat—until they were worn nearly threadbare; he walked, and rode in street cars to save cab fares, when his poor health demanded that he should save his strength and his convenience all the time. He never speculated; to “take a flyer” was an unknown language to him—it was merely jargon. His business affairs were to most of his friends a closed book.

His only extravagance was in gifts to his friends, and his railroad journeys, to the Pacific Coast mainly, for his vacations. But those trips when he was half sick were good medicine for him—he would begin to gain in strength and appetite the moment he got on the train. Those trips prolonged his life.

But this frugality was a trait of his boyhood. What boy going to town or on an excursion would not wish and welcome ample spending money! Yet in this man's boyhood and youth he substantially always refused to take as much money as his parents thought he ought to have. Nor was this habit due to a hoarding impulse, which a few boys have—but to a scruple against thoughtless spending for trifling desires and appetites that are so common with boys. It was really a proof of his early serious-mindedness and refinement of taste—which so characterized his whole life.

Dr. Haines was a moderate contributor to the literature of medicine. He was a great reader of the literature, and he distributed a lot of it through his lectures and other activities. He had little opportunity, inclination or time to sit down and write a book.

He did many years ago join with Dr. Peterson in compiling a monumental work on toxicology and legal medicine that did the authors great credit.

The last of his literary activities was in revising and expanding that work for a new edition, which was recently published. In this last labor he was greatly helped by his friend and our friend, Dr. Ralph Webster, who did so much toward its excellence that his name very properly appears as joint author.

A confirmed bachelor, he was no woman hater. There is no evidence that he ever thought of marrying, but he had many mature women friends, highly refined and cultivated, whose society he enjoyed, and toward whom he had a chivalric friendship for many years.

Few men have had more firm and abiding affection for their own families than he had. His relations with his parents were ideal—his mother he worshiped. His two sisters, and the children and grand-children of one of them, he made his family in the best sense. To them he was at once brother, father and friend.

Dr. Haines enjoyed travel, and first and last did much of it. He was a very intelligent and observant traveler. He made five

or six trips to Europe. He crossed first in February, 1875, and remained fifteen months. He visited hospitals, laboratories and chemical manufactories in various European centers, but only seriously studied in Paris, where he attended lectures at the Sorbonne and College of France in the winter of '75 and '76. This trip was made with the late Dr. J. Adams Allen and wife. He made several other trips to Europe, notably in 1896, when in his absence his father sickened and died. He crossed again in 1898. One or more times he was accompanied by his superb, lifelong friend, Mr. Arthur Wheeler.

In his long stay in Paris he developed his use of the French language, and on occasion served as interpreter for his American friends. One time he had a lot of fun helping out Mrs. Allen at a dressmaker's—interpreting as having been said by the dressmaker a lot of foolish and absurd things (which she did not say), but which scandalized Mrs. Allen, much to the amusement of the interpreter, and presumably of Dr. Allen also. In the summer of 1876 he came home to begin his new duties in Rush College, as the permanent professor of Chemistry—which was to continue for forty-six and a half years.

He liked to visit new towns in his own country, and had to his credit and his ambition a visit to every State in the Union and to most of their large cities. He had done this when the new State of Oklahoma was erected. This must have been about 1890, for he had planned to go with me for a short vacation to Las Vegas, New Mexico, in the summer of that year; we went, and returning branched off in Kansas and traveled south to the new State. We stopped at the first station south of the State line, where we could get something good to eat. We got lunch at a frontier, rough, wood, eating room and took the next train back to Kansas and Chicago.

He determined to visit me (then expatriated in California) in 1892, but wanted to see the Grand Canyon of the Colorado on the way. The late General Corbin of the Army (then stationed at Los Angeles) and I met him at Flagstaff, and we all journeyed together by stage to the Canyon. The water at the brow of the canyon was known to be bad, and the doctor brought a case of bottled mineral water and had it put on the back of the stage; but after we had traveled a dozen miles we found we had left the water behind—possibly a trick of the driver to lighten his load. At the canyon the sole supply of water was a shallow pond of yellow fluid of bad taste—we started back the next day.

Dr. Haines was a humanitarian; so also were his parents; they were kind to animals. He would never go fishing or hunting to kill a living thing for the pleasure of it. He would, however, willingly have hunted and fished to get necessary food.

He was fond of cats—but never would handle them. Their faces always fascinated him. One of his nieces amused herself and him by sending him on memorial days all sorts of cat pictures.

The Haines family always had cats, and refused to drown any of the oncoming kittens to keep down the feline population. When the cats became a crowd, Mr. Haines began to advertise in a newspaper that he would send by express prepaid to anybody who would request it, one or two fine maltese kittens, provided they would be welcomed and kindly treated. One man wrote asking for two kittens, promising that he would give them a Christian home.

Many intellectual people, sometimes in their lives, enjoy the diversion of some excursion into the realm of the mystic. Walter had a narrow specialty of this sort—it was so-called independent slate writing. It was like the mystery of fortune-telling to some minds.

He consulted the “best” slate-writers in several large cities, and brought away from some of them the slates of their “triumphs”—really the indubitable proofs of their conjury.

For small fees he had first and last a lot of fun out of it—and he enjoyed regaling some of his intimates with his experiences. He was too sensible to let it disturb the sanity of his mind or the joy of his human soul—and it could never disturb his estimate of a chemical reaction.

Friendship was one of Walter’s strongest and noblest traits. His attitude toward his friends was one of life constancy—and with a few it was close and very intimate. He magnified the virtues of his friends, forgave and forgot their peccadillos; he idealized them, and was ready to defend them at any hazard. If in the face of such devotion a friend failed him or defected, it was to his heart like the death of an idolized child. To him it was the going out of a star.

Thus lived and was ended a rare life that early received a handicap that threatened a speedy death. On the threshold of a promising career, he was touched with a mortal blight. But by the grace of his physical inheritance, by care, unexampled courage, and a spirit that was superior to many calamities, he staved off the fatal day, and worked on to past seventy years—and made a career of usefulness and beauty that all men might envy. He preserved through it all a rare serenity of soul and sweetness of spirit in spite of the peltings of fate upon his body.

He was unselfish; and unresentful even when he had been wronged. He spoke no ill of others—his daily life to the end radiated grace, love, kindness and friendship; and in his going he has left behind him an irradiation of spiritual beauty that is the charm of the gods!

WALTER STANLEY HAINES

RALPH W. WEBSTER

RUSH COMMENCEMENT—JUNE, 1923

Walter Stanley Haines, beloved friend, teacher, advisor and colleague, died on January 27, 1923, after completing fifty-one years as a teacher of chemistry, *materia medica* and toxicology, forty-seven of which were spent in the halls of our honored Alma Mater. We grieve for him from the bottom of our hearts but manfully bear the shock of his death, tempering our grief with thankfulness for the long period of usefulness, to the world at large and especially to the medical profession, which has been granted him.

Medical science, during the past few decades, has been directed to some extent toward the development of workers and investigators, whose field is neither the hospital, sick-room, nor morgue, but, rather, the laboratory where the study of the chemical properties of the various secretions and excretions of the body, both normal and pathological, has been extended to such an extent that many diagnostic and prognostic factors have become firmly established. In close relationship to such investigations stand those having to do with the study of the physical and chemical properties of drugs, the mechanism and the results of their action upon the body, the pathological changes which they cause in the body when taken in overdose, and the methods of their detection in the body tissues and fluids. Such studies necessarily involve a more or less comprehensive knowledge of chemistry in its varied fields of application.

With the idea of fitting himself for his life-work along these lines, Professor Haines early undertook the study of chemistry at Massachusetts Institute of Technology, but was not permitted to finish his course there owing to a severe attack of pleurisy which necessitated his removal from the trying climate of Boston. After spending several months in recuperation in the open country, his pleuro-pulmonary trouble was temporarily controlled, although he was to be, for the remainder of his life, a more or less constant sufferer from periodic attacks of respiratory disorders of one kind or another. After his health improved, he entered upon the study of medicine, matriculating at the Chicago Medical College in 1871, from which he graduated in 1873. The position of Professor of Chemistry in that institution becoming vacant in 1872 by the resignation of Professor Bartlett, Professor Haines was at once appointed to this chair, then entering upon his unusual teaching career of fifty-one years. In 1876 he succeeded Professor Henry M. Lyman as Professor of Chemistry in Rush Medical College, a

position which he held up to the time of his death, a continuous service of forty-seven years in one institution. Truly, a most remarkable achievement.

In the early teaching of chemistry in the medical schools, there was much to be desired and much to be contended with. The student of these days, with his extensive pre-medical education, can hardly realize the conditions then existing. The preparation of the students was very limited, many of them possessing little more than the ability to read and write. Our country was developing rapidly, population was moving westward, doctors were much needed and, in consequence, men must be admitted to the medical schools where they could be given the best teachings of medicine and surgery as then understood, even though there might be some inadequacy in their preliminary training. It fell to the lot of Professor Haines to teach "a group of men who knew absolutely no chemistry, no physics, no biology, in two sessions of five months each, in a course of lectures that was repeated each year, all the chemistry that they were to know in the practice of medicine." It is very doubtful if any man had the faculty of doing this as well as did Professor Haines. As the years passed, the admission requirements were advanced so that the type of student improved greatly. However, then, as now, it was most difficult to bring the student to a realization of the fact that chemistry was of much importance in the study of medicine, few having the insight to regard it as anything more than a collection of disconnected facts and formulae, which were often forgotten as soon as they were learned. However, under the more than careful instruction of Professor Haines, these men were soon much interested in their work and certainly gained a fundamental knowledge which was to be of much value to them in their later work. The earlier students were somewhat rough-mannered, illy grounded in the fundamentals, and manifested little or no respect for the dignity of the position of their teachers. However, it was a most remarkable fact that Professor Haines, a little wisp of a man with a frail body but with a strong personal magnetism and pleasing personality, absolutely dominated his class rooms to such an extent that not one of his hearers had a thought beyond doing all in his power to maintain a decorous and attentive attitude, each trying to do his best out of respect and real love for his teacher. In simple language with frequent repetition of the points involved, he so presented the fundamental facts of chemistry that it seemed almost impossible that any student should fail to grasp the subject. It is certainly safe to say that all of his students, some 6500 or more, listened alertly to his lectures and gained, for the time at least, a fairly comprehensive knowledge of chemistry in its relation to medicine. In the later years of his teaching, Professor Haines had little to do with the subject of chemistry as this has been

taught at the University of Chicago, but his presentation of the fields of *materia medica* and of toxicology has shown the same assiduous attention to detail and accuracy as characterized his handling of chemistry. I do not believe that there ever was a teacher so universally beloved by his students as was Professor Haines. This deep affection and regard for him and his teachings has been kept alive in the breasts of the alumni through all the many years.

Professor Haines always had the interests of his students at heart and was never too busy to talk with and advise any that might come to him. This inherent quality of helping others, this spirit of self sacrifice, had much to do with his being beloved by all who came in contact with him, although his manner, his polished speech, his physical frailty, and his high ideals all added their mite. He knew by name every student in his classes and kept this memory of the names and faces of his students for years, a fact often commented upon by alumni whom he chanced to meet.

Not only was Professor Haines a master in his field as a teacher, but he was, also, a prominent figure in the research and investigation which has advanced the special science of toxicology. While it is, perhaps, true that he was not constantly making contributions to the literature of this subject, yet throughout his busy professional career he was frequently called upon to work out new methods of investigation, to make improvements in the methods of study of certain types of case, and to advance new points of view into the interpretation of his chemical findings. His mastery of toxicology was so well recognized throughout the country that he was regarded as our foremost toxicological authority. The records of the courts of almost every state in the Union contain some statements which may be directly traceable to his testimony in capital cases. Each case presented to him for investigation became in reality a research problem, inasmuch as conditions under which he worked were rarely the same in any two cases and as many factors, about which little or no mention was made in the literature, had to be carefully studied before he was ready to draw his conclusions. Some of the many experiments made by him in solving his various problems have been recorded in the scientific literature, but, as most of this work was of a purely medico-legal nature, the records of the points involved must be sought in the court proceedings. He has, however, contributed several comprehensive and masterful articles upon various toxicological subjects to the larger systems of Legal Medicine and he was the editor of the toxicological section of the well-known work on Legal Medicine and Toxicology by Peterson and Haines, which work is now held as an accepted authority in all courts of law in this country. In such extensive articles he has made many allusions to points worked out by himself, although he simply presents them as mat-

ters which have been accepted rather than as facts original with him. In his writing he presented his subject-matter in the same clear, concise, exact language that he used in his lecture room, his diction being elegant and his facts and conclusions being most carefully stated.

Although always in delicate health and being forced to conserve his strength and energy far more than most of us, he was indefatigable when engaged in his investigations and oftentimes did much more than was for his best interests. He believed that the responsibility in capital medico-legal cases should not be placed upon the shoulders of any one worker and, in consequence, practically always insisted that another investigator either work with him or independently confirm his findings. When called upon to testify, he was the ideal expert witness. Realizing that conviction or acquittal of a human being frequently hung on his testimony, he was always dignified and serious and, often, somewhat overwhelmed with his responsibility. His thorough mastery of his subject made it impossible to trap him with a grilling cross-examination and his polite, gentlemanly, courteous, suave, and distinguished manner at once had its influence upon the court and jury. When presenting his facts, he used simple and refined language, going into full and explicit detail whenever it was necessary to make the matter clear to the jury. In answering questions put to him, he invariably answered directly without any attempt at evasion. The truth to him was the basis of his testimony, so that he was always ready, willing, and anxious to answer fully questions of either party in the case. Courts and juries were at once convinced that his testimony was full, complete, unbiased, and truthful and that nothing had been held back that should have been explained to them. His testimony has been heard in most states of this country and his depositions have often appeared in foreign courts. Not infrequently has he appeared in cases other than those of a strictly medico-legal nature, as for instance in patent cases, in suits involving the question of adulteration of foods, etc. His opinions have never been offered until he had gone thoroughly into the case and convinced himself of its true merits. Knowing his facts, his conclusions were corollary.

As a member of the Committee for revision of the Pharmacopoeia for many years, his suggestions and advice were always accorded that deference which is given only to one that speaks with authority. Although a most mild mannered man, he was very firm in maintaining his opinions and position upon questions and hence was always regarded as a worthy opponent. His work on various Boards and Commissions for standardizing food products was always characterized by a judicious weighing of both sides of the case. Maintaining an open mind, listening impartially to the arguments of producer as well as to those of

State or Government, his conclusions were reached only after most careful deliberation as to the strict merits of the case. In laying down standards for the degree of adulteration of drug and food products, as well as standards of purity, he believed that it was essential that the rights and interests of both the public and the producer should be borne in mind. His judgment was sound and based on his scientific knowledge as well as upon his feeling of the rights of others, his conclusions being the result of careful and exact investigation of all the points involved.

These qualities, which were possessed by Professor Haines to such a marked degree, have made him one beloved by all. "We have lost perhaps the greatest teacher that Rush Medical College has known, certainly the most beloved member of the faculty, the man who had the deepest place in the hearts of the alumni." Certain it is that the lives of few are so filled with such a spirit of self-sacrifice, the earnest desire to do for others, even in spite of all the handicaps of physical suffering and illness throughout his long and eminently successful life. The world is far better for his having lived and toiled in it. His whole life would seem to be an exemplification and personification of the well-known lines of Bryant: "So live that when thy summons comes to join the innumerable caravan that moves on to the pale realms of shade, where each shall take his station in the silent halls of death, thou go not like the quarry slave at night, scourged to his dungeon, but sustained and soothed in an unfaltering trust, approach thy grave like one who wraps the draping of his couch about him and lies down to pleasant dreams."

REPORT OF THE TREASURER

The report of the Treasurer for the year ending June 13, 1923, shows the association is on a sound financial basis. This is due to the action taken by the Association last year in raising the alumni dues. There has been an increase in the number of active members from 30% to 35%. The figures are as follows for the past year:

Total membership.....	4030
Annual members for 1923.....	1202
Members paying advanced dues.....	409
Members paying endowment dues.....	20

Members paying their Annual dues in the past three years compare as follows: 1921, 531; 1922, 1016; 1923, 1326.

The Endowment Fund increased from \$603.00 to \$890.00 the past year.

The Dodson Testimonial Fund now totals \$1370.90.

The Haines Library Fund totals \$1001.81 less \$156.50 for the gift to Dr. Haines.

The expenditures have increased over 1922, the chief items being:

	1922	1923
Cost of Bulletin.....	\$834.68	\$1130.81
Clerical and stationery.....	498.55	619.00
Printing	227.00	385.00

The Endowment Fund \$500.00 toward the work Dr. LeCount is doing on necropsy records at Rush Medical College. The same amount is to be given the coming year.

The successful work during the past year is largely due to the efforts of Miss Eleanor Fox at the College and the Association owes her an expression of thanks.

CARL O. RINDER.

CORRESPONDENCE

RUSH ALUMNI IN SOUTHERN CALIFORNIA

To the Editor:—On July 3, the Rush Alumni Society of Southern California had a banquet in honor of the visitors who were with us at that time.

The dinner was held at the University Club of Los Angeles. There were ninety-six Rush men at the tables. The meeting was a very enthusiastic one. We of Southern California were very glad to have an opportunity of hearing of the things that were going on in Chicago, not only in medical lines, but with old Rush. We are so far away from things it is seldom that we hear of the changes being made in the school.

Doctors Lewis, Wilder, Ormsby, Moore and Gatewood told us the things that we were anxious to hear. Southern California has a very large and active Alumni Society. There are usually about ninety people at our meetings.

If at any time an alumnus is contemplating a trip to Southern California, I would appreciate it if he will let me know. We are always glad to show off our county here and to visit with our old school mates.

WILLIAM H. OLDS, '12, Los Angeles.

PACIFIC NORTHWEST ALUMNI MEET

To the Editor:—Pacific Northwest Alumni gathered together, forty in all, at the Rainier Club, Seattle, on the night of July 17, 1923. The occasion was in honor of Drs. Ormsby and Rosenow, who were lecturing here with the University Extension course. Dr. Ormsby gave us a delightful talk on Rush as is today and what progress is being made in the new school. He is the same teacher as of old. Dr. Rosenow related the incidents in his student life at Rush, his pregraduate work under Otto, and the many obstacles that he had to overcome.

The Banquet was presided over by Dr. A. I. Bouffleur, 1887, who was at one time Professor of Surgery at Rush. Then too, we can well boast

of having with us, one of the oldest alumni in existence, namely Dr. S. J. Holmes, who was the first teacher of Pathology at Rush. He is of the class of 1876. And if any of you old timers remember J. W. Kennicott of 1885, well, he is just the same and perhaps a little worse for he kept the party spellbound for thirty minutes with his line of vaudeville. Other bits of oratory was gleaned from H. M. Read 1883, C. T. Cooke 1890, H. S. Judd 1895, Lee Ganson 1894. At 12 o'clock midnight, with the eats gone, the party ended. Classes represented were:

Ed. Bailey, 1885	E. C. Hamly, 1902	C. S. Powell, 1917
E. E. Judd, 1898	T. C. Baldwin, 1903	O. H. Christoffersen, 1917
L. Schreuder, 1898	Don H. Palmer, 1903	C. E. Watts (Red), 1918
O. W. Schmidt, 1899	W. C. Speidel, 1908	A. H. Bries, 1918
C. P. Gammon, 1899	L. W. Renfro, 1913.	G. J. Mohr, 1919
W. J. Griffin, 1901	O. A. Thomle, 1914	John Lundy, 1919
C. B. Hoffman, 1901	Jim Hunter, 1915	E. A. Johnson, 1920
H. J. Narramor, 1902	L. L. Bull, 1917	

Incidentally be it known that of the twenty-six speakers on the program of the Pacific Northwest Medical Meeting held in June, having an attendance of over four hundred, eight of this number were from Rush. Not so bad.

O. H. CHRISTOFFERSEN, M.D., Seattle.

LIST OF OIL PORTRAITS IN RUSH MEDICAL COLLEGE

- Daniel Brainard, 1812-1866, Founder, by Geo. P. A. Healey.
- James Van Zandt, Blaney, 1820-1874, by
- Joseph Warren Freer, 1816-1877, by Frederick Warren Freer.
- Jonathon Adams Allen, 1825-1890, by Phillips.
- DeLaski Miller, 1818-1923, by Geo. P. A. Healey.
- Ephraim Ingals, 1823-1900, by Geo. P. A. Healey.
- Edward Lorenzo Holmes, 1828-1900, by Frederick Warren Freer.
- L. C. Payne Freer, 1865-1892, by Frederick Warren Freer.
- Nicholas Senn, 1844-1908, by Micaelowski.
- Henry Munson Lyman, 1835-1904, by Charles Corbin.
- Walter Stanley Haines, 1850-1923, by Arvid Nyholm.
- Ludvig Hektöen, 1863-, by Hubbel.

NOTICE

Arrangements may be made through the University of Chicago to secure souvenirs of the old building of Rush Medical College when it is torn down this spring. There are available sections of the staircase, hand rail, spindles, etc. If interested write to THE BULLETIN.

"MEMORIES" OF RUSH, '89

When this class made the line in the year '89
We had little in stock but our push
But we had the heart to play well our part.
And to-night we can eulogize Rush.

The building was sound from the roof to the ground
It was builded as firm as a rock
In those halcyon days passing up the D. J.s
The old fortress withstood every shock.

By never a kick did they loosen a brick
Nor batter a shutter or door
The windows and walls withstood many falls.
Not a plank disappeared from the floor.

But the building is gone, like a mist in the sun
Its traditions and all its renown;
Then where did it go? Tell me how if you know
They succeeded in tearing it down.

It took "labor pains" to pass Walter Haines
And Bridge was like pulling a tooth
Prof. Hyde was a fox, as likewise was Knox,
And poor Parks passed away in his youth.

Since Lyman and Ross were well known to be boss
They came in for intimate pains
If you dared to have fun with our chief surgeon, Gunn,
Well—the prosecutor got your remains.

While dear Uncle Allen has long ago fallen
From the ranks of the men whom he taught
His memory lives and an impetus gives
To the fellows who have not forgot.

It may be from sinning, our skins are now thinning
And the angle is leaving our jaw,
While we boast we feel younger, our eyebrows are longer
And we look a bit stiff when we bow.

Then eyes right, and hearts light, as we look back to-night
To the days when we started from tau
While it happens for sooth we ARE loosing our youth
Let us bet our whole stack, on the draw.

E. B. C.

LABORATORY SERVICE

The ideal of laboratory service has changed during the past few years and neither the physician nor the laboratory itself is contented with a few routine examinations, issued without comment. Our desire is that of progressively more service rendered, a strong interest in each case, an effort to understand its peculiar problems, readiness to suggest further examinations and to discuss them and their interpretation and application. This kind of service is always ready for those who desire it, and in proportion as we render it we shall be more useful to the physician and thereby more beneficial to the patient.

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18 East 41st Street

DETROIT:
910 Peter Smith Building



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University Club Building

SAGINAW, MICH.:
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HANDBOOK OF TUBERCULOSIS

JOHN RITTER, M.D.

Instructor on Physical Diagnosis and Clinical Lecturer and Instructor on Tuberculosis,
Rush Medical College.

This Handbook of Tuberculosis, though mainly compiled for those medical students who are interested in the various problems of tuberculosis, is equally well adapted to the wants of the busy medical practitioner.

The Handbook of Tuberculosis is divided into three parts. In the first part the various problems relating to tuberculosis are considered from an academic standpoint. This is elaborately given in nine chapters. To clinical tuberculosis the second division of the Handbook, twenty-six chapters are devoted, and in the third part of the Handbook, tuberculosis from the laboratory viewpoint is considered. Some three chapters are given to laboratory diagnosis.

The Handbook is illustrated by a colored frontispiece and by sixty-one cuts, throughout the text of which most are original plates.

A well-bound volume of approximately six hundred pages; price, six dollars (\$6.00).

A table of contents from the "Handbook of Tuberculosis" will be mailed on application.

JOHN RITTER, M.D., 3124 Washington Blvd., Chicago.

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MISS CATHERINE A. McAULIFF, Librarian, Rush Medical College

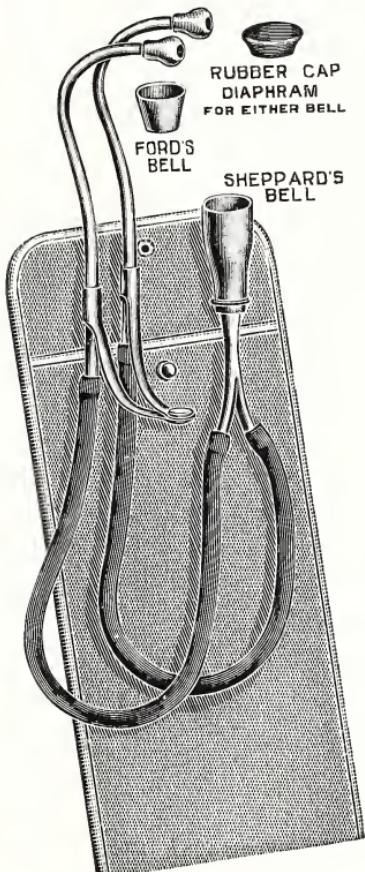
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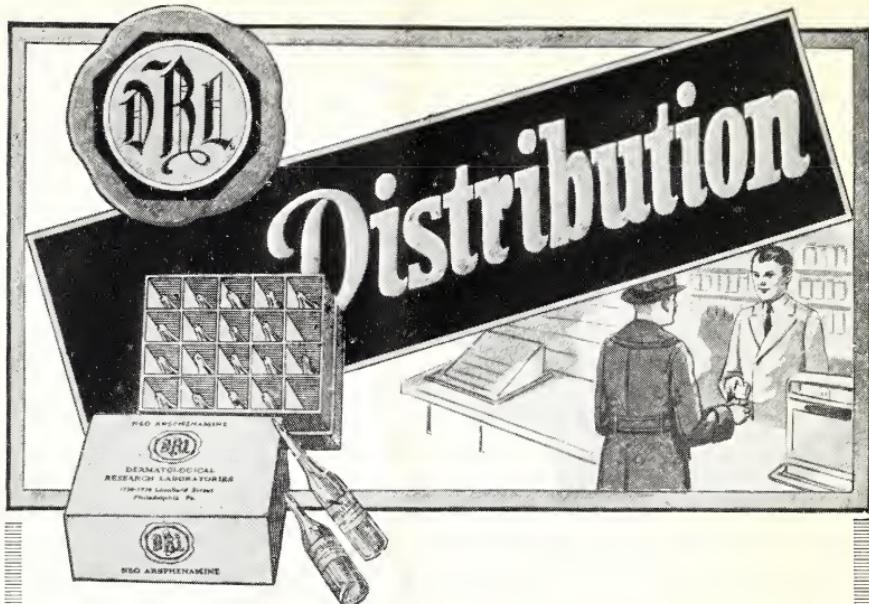
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VOL. XVIII

May, 1924

No. 2

THE BULLETIN



PUBLISHED BY THE
ALUMNI ASSOCIATION
OF
RUSH MEDICAL COLLEGE

Special Notice to Alumni

Commencement Exercises of Rush Medical College—the *last* Commencement under the old régime [see statement by President Burton in this Bulletin] and the *last* Commencement to be held in the *Old Rush Building*. This building is to be wrecked about July first next.

UPPER AMPHITHEATRE—College Building

Wednesday, June 11th, 1924 — 3:00 P.M.

DR. MARTIN FISCHER of the University of Cincinnati will be the Commencement Orator

ALUMNI MEETING

Auditorium Hotel, Wednesday, June 11th, 5 P.M.

FACULTY and ALUMNI BANQUET

with special demonstration in honor of Dean Frank Billings,

Auditorium Hotel, Wednesday, June 11th, 6:30 P.M.

TICKETS \$2.00 PER COVER.

DR. LUDVIG HEKTOEN—*Toastmaster*

GOOD PROGRAM

Reunions of the Classes of 1884, 1894, 1904 and 1914

**JAMES H. HARPER,
1748 W. Harrison St., Chicago, Ill.**

*Please reserve for me places at the Annual Banquet.
Check for \$..... is enclosed.*

..... *Class.....*

Address

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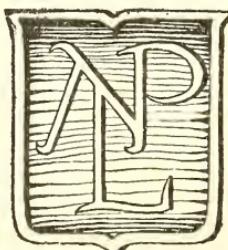
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LABORATORY SERVICE

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The Bulletin

of the

ALUMNI ASSOCIATION OF RUSH MEDICAL COLLEGE

Volume XVIII

MAY, 1924

No. 2

Editor, MORRIS FISHBEIN - - - 535 North Dearborn Street, CHICAGO

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ORIGINAL

RUSH MEDICAL COLLEGE
OF
THE UNIVERSITY OF CHICAGO
ERNEST D. BURTON
PRESIDENT OF THE UNIVERSITY OF CHICAGO

The title of this article states what is now, after twenty-five years of effort and waiting, an accomplished fact. The contract of affiliation entered into in 1898 was made with a view to an ultimately closer union. In making his gift for the erection of Senn Hall, Dr. Senn had this in mind. The contract of 1917 was expected to lead to it very soon. The decision of the Supreme Court of Illinois handed down, April 14, 1924, approving the new contract of 1923, removes the last obstacle to its actually going into effect.

Under this new contract the University will conduct a medical school on the University quadrangles under the name of the School of Medicine of the Ogden Graduate School of Science. This school will continue to conduct the first two years of work for the M.D. degree, and eventually will take over the last two years also. It will besides offer opportunities for research in connection with the departments of science conducted on the University quadrangles.

On the west side the advanced teaching and research already begun in certain departments will be gradually developed into what will be known as Rush Postgraduate School of Medicine of the University of Chicago. This school will be open to persons who have already obtained the M.D. degree and will provide opportunities for graduate study in the several clinical departments, which is expected to be of the same grade as that which is pursued in other University departments offering work for higher degrees. Meantime, for at least four years, while the Albert Merritt Billings Hospital and the associate laboratories are being built on the south side, the last two years of work for the M.D. degree will continue to be done at Rush Medical College on the west side, which, however, will be hereafter a College of the University of Chicago, having the same status, for example, as the College of Education or the Law School.

It is the belief of the representatives of Rush Medical College who have been interested in bringing about this result that by it the original purposes of the College will be realized in a larger degree, not only than was originally in mind, but than would be possible in any other way now in sight.

The representatives of the University welcome the new arrangement for similar reasons. They believe that by developing medical education at two centers in the city, one in close contact with the great hospitals of the west side and the other on the University quadrangles and in close contact with the graduate departments of science in the University, more can be accomplished for medical science and for medical practice than by concentrating work at either point.

Plans are being completed for the Rawson clinical laboratory to be erected on the present site of the Rush College clinical building. During the period of construction, the Laboratory building south of Harrison Street will be utilized for the work of the college, and the necessary changes in this building are about to be made.

It is hoped that arrangements will soon be made by which the Rush Alumni Association will be drawn into close relation to the Alumni Association of the University of Chicago.

PLANS FOR THE NEW RUSH MEDICAL SCHOOLS

With the signing of the new contract between the Rush Medical College and the University of Chicago, May 8, the consolidation of Rush with the University is finally effected and the way opened to the immediate realization of their enlarged medical program. President Ernest D. Burton of the University states that the reorganization of medical work made possible by the signing of this contract, will enable the University of Chicago to take the fullest advantage of recent progress in medical science. The work will be organized under three schools:

(1) *The Rush Medical College of the University*, which will continue to prepare students for the M.D. degree on its old site on the West Side, until the Graduate School of Medicine of the University is fully organized on the Quadrangles on the Midway.

(2) *The Rush Post Graduate School of Medicine*, to be housed with the Rush Medical College in the new Rawson Laboratory on the West Side, which will train persons already holding the M.D. degree in medical research and the various fields of medical practice.

(3) *The Graduate School of Medicine of the University of Chicago*, to be housed in the new medical buildings at the University of Chicago, and to prepare students for the M.D. degree, which is now being organized by Dr. Franklin C. McLean, Professor of Medicine, and Dr. Dean D. Lewis, Professor of Surgery, in conference with other medical authorities. When this school is in full operation, it is expected that it will absorb the work of the Rush Medical College described above, and the two permanent institutions will be the Rush Post Graduate School of Medicine on the West Side and the Graduate School of Medicine at the University.

The University will proceed at once with the erection of the necessary buildings. For the Rush Medical College and the Rush Post Graduate School of Medicine there will be erected on the site of the Rush Medical

College at Harrison and Wood Streets, a \$500,000 laboratory to be known as the Rawson Clinical Laboratory.

The building was originally made possible through the generous gift of \$300,000 by Mr. Frederick H. Rawson, President of the Union Trust Company.

It is to be erected at the northwestern corner of South Wood and Harrison Streets on the ground now occupied by the old Rush Medical College Building. It will cover an area approximately 90 x 100 feet and will be five stories in height. Connections will be made with Senn Hall on all floors, and with the Presbyterian Hospital. The building will house the administration offices of the College and the large medical library and special faculty rooms on the first floor. The Departments of Occupational Therapy, Hydrotherapy, locker rooms and rest rooms and the library work room will be in the basement.

It is planned that the Occupational Therapy will establish contact with the industries of Chicago and vicinity for the purpose of training and placing in positions of employment persons suffering from various physical handicaps.

The second, third and fourth floors will be devoted to various departments of the Central Free Dispensary, classrooms and laboratories.

On the fifth floor will be the Department of Pathology, which will be called the Norman Bridge Laboratories of Pathology. Dr. and Mrs. Norman Bridge of Los Angeles contributed \$100,000 in order to enable the University to build the fifth story of this building.

The building will be so constructed that seven stories may eventually be added to it to meet the increasing needs of the Rush Post Graduate School.

The West Side Medical plant will then include the Rawson Clinical Laboratory, Senn Hall, a five story Laboratory Building for Research workers, and the affiliated institutions—the Presbyterian Hospital, the John McCormick Memorial Institute for Infectious Diseases, the Home for Destitute Crippled Children, and also teaching facilities at Cook County Hospital.

While the undergraduate work of Rush Medical College will continue here for several years, there will be developed the postgraduate program. This will emphasize three lines of work: investigation in special subjects by both students and staff; clinics and bedside studies in special fields of medical or surgical practice, in conjunction with the laboratory studies pertaining to those fields for practitioners who wish to devote a year or more in preparation for practice in a specialty or in general medicine; short terms of intensive clinics for practitioners who can devote less time, but who will thus be enabled to keep informed of important advances in medical practice.

The new Medical Buildings for the Graduate School of Medicine on the Midway will occupy the two blocks directly west of Cobb Hall and the Classics Building, and will cost more than \$3,000,000, toward which the Billings family has given a million dollars for the Albert Merritt Billings Hospital, and Mr. and Mrs. Max Epstein \$100,000 for the Epstein Dispensary.

The first units of the new School of Medicine will be erected by the University in the area bounded by Fifty-eighth and Fifty-ninth Streets and by Ellis and Drexel Avenues. It is hoped that construction of these units may be begun by the end of the coming summer.

The units projected for immediate construction are comprised in two groups. The Albert Merritt Billings Memorial Hospital with 200 beds, which will face south on the Midway, between Ellis and Drexel Avenues, includes the following units: the Administration Building; a Medical Clinic for internal medicine and the medical specialties, including wards, outpatient departments, and laboratories, to be occupied by the Department of Medicine; a similar Surgical Clinic for general surgery and the surgical specialties, to be occupied by the Department of Pathology. This group will also house the Billings Library, a gift from Dr. Frank Billings to the University.

The Physiological group will include two units to be occupied by the Department of Physiology and the Department of Physiological Chemistry and Pharmacology. These buildings will be erected on the south side of Fifty-eighth Street between Ellis and Drexel Avenues, and will connect with the Hospital group.

The buildings as projected, while designed especially for the purpose which they are to serve, will be in Gothic architecture to harmonize with the other buildings of the University.

These buildings together with the projected future units will house the various departments concerned with the teaching of Medicine and investigation of disease on the University campus, and as integral parts of the University. The conception underlying the plans is that of the inclusion of the so-called Medical Sciences as University subjects, to be recognized as such from the point of view of their broad scientific aspects. This conception has been in effect at the University for some years with respect to the Departments of Anatomy, Physiology, Physiological Chemistry and Pharmacology, Bacteriology, and Pathology, but will now be expanded to include the Departments of Medicine and Surgery. It is believed that this conception, together with the advantage of physical inclusion in the University, will serve to increase the usefulness of the Departments, both as to their function in educating physicians and investigators, and as to their contributing to the increase of knowledge of disease.

The buildings to be erected at once will include the entire Fifty-Eighth Street front and the central part of the Midway front, the latter to be 254 feet in length. The wings shown in the drawing will each eventually add 155 feet to this Midway façade, making the total Midway frontage 564 feet.

This magnificent equipment opens before the University an almost unparalleled opportunity for service in the field of medicine and will be expanded as rapidly as the generosity of the University's friends in Chicago permits.

Rush Medical College has been in existence for three-quarters of a century and has had a long and honorable career in the teaching of medicine and surgery. The great advance in medical science, a corresponding increase in the interest of medical education, and the desire of the trustees and faculty of Rush Medical College to achieve in the fullest possible measure the purpose for which the College was originally founded, have led to this new arrangement. Its amalgamation with the University of Chicago means in reality a career of still greater usefulness for Rush Medical College.

THE HOSPITAL AND THE INTERN

ASA S. BACON

SUPERINTENDENT, PRESBYTERIAN HOSPITAL

CHICAGO, ILLINOIS

The position of a physician today is vastly different from what it was ten years ago for, since the World War, the doctor has found it more necessary than ever before to link himself with a hospital to promote his medical knowledge. Hospitals serve as a center, at which doctors may gather, exchange opinions and familiarize themselves with the latest advances in medical and hospital methods. The people are turning more and more to the hospital when sick. Superintendents of hospitals are being constantly asked to recommend physicians, for cities are growing so rapidly that strangers, when taken ill, instead of calling the doctor around the corner whom they do not know, call a hospital to recommend a doctor, as they are confident that the hospital will recommend a good man. This service is creating a greater demand than ever before for hospital beds.

We have in the United States, according to the 1923 report of the American Hospital Association, 6,000 hospitals with 600,000 beds or about 5 beds to 1,000 population. There are 500,000 patients in hospitals at all times, and the annual expenditure for maintenance is \$525,000,000. The annual expenditure for new hospitals and equipment is \$450,000,000 and the value of buildings and grounds is \$2,000,000,000. Total endowment funds are \$400,000,000. Ten million people are treated annually, and in addition there are 4,000 dispensaries, with total visits from patients of 29,500,000. Think what these hospitals and dispensaries mean to the people. Think what they mean to all of us—directly through personal service and indirectly through education, medicine, nursing, social service, dietetics and research.

ORGANIZATION

Good organization is the prime requisite for medical and surgical efficiency. The average hospital is carefully organized. The Board of Trustees is the governing authority of the hospital. The superintendent, appointed by the Board, should have entire administrative authority over all departments of the hospital. The medical staff is definitely organized for the promotion of medical science, common policies and satisfactory relations with the administration of the hospital. The intern staff assists the medical staff and the administration in the proper care of the sick. The nursing staff also assists in the proper care of the sick.

Next in order are various departments, such as, outpatient, social service, occupational therapy, roentgen ray, pathologic laboratory, and various others.

Patients treated in most hospitals of today are assured of good medical and nursing care. Hospitals are fully supplied with modern appliances and equipment, such as cannot be obtained in the home. Furthermore, the hospital is in a position to meet any emergency that may arise.

Hospitals have rules and safeguards regulating different departments and, while mistakes do happen, they seldom are of a serious nature to the patient. However, there is a combination of interests that makes team work, a team work that ordinarily does not have to be bound by rules.

EQUIPMENT

When you visit the bedside of a patient, do you ever think how many sheets and pillow cases it takes to equip a hospital? Do you think of the sacrifice some one has made to endow that bed so that the poor patient can be cared for without cost to himself? Do you think of the valuable time given by the physician to care for this patient, not only to benefit the patient, but to afford proper training to the intern and the nurse?

I will enumerate a few items in the Presbyterian Hospital to give some idea of the equipment needed to carry on its work.

In the housekeeping department, 3,650 sheets are kept in use to care for the 450 beds and cribs; 2,550 pillow cases and 2,600 blankets.

Three hundred thousand yards of gauze are used annually, which if stretched out would make a walk 3 feet wide and 170 miles long.

The number of safety pins used during the year is 86,400, which if linked together would stretch around a city block nine times.

For surgical work, bathing of patients, laboratory, etc., we use 50 barrels of alcohol a year and, if we used it as floor paint, it would cover 44 acres with one coat.

There are 1,400 stair steps, and the floor space, if laid out, would cover seven city blocks. This, in connection with the walls and ceilings to wash and paint, together with 1,500 windows to keep clean, requires a crew of fifty people.

Our laundry washes 72,000 pieces a week.

To heat the buildings and to supply steam for sterilizing hot and cold water, our four high-pressure boilers consume 19 tons of coal a day, or 7,000 tons during the year.

One hundred electric pads, together with the same number of hotwater bottles, are used to relieve pain.

We serve 887,000 meals a year, which takes 121,000 pounds of meat, 36,000 loaves of bread and 54,000 gallons of milk and cream.

This gives some idea of what is required to operate a hospital, for what is true of the Presbyterian is proportionately true of other hospitals.

THE INTERN

As physicians you are interested in the relation of the intern to the hospital. Dean Irons covered this very thoroughly in his address delivered to the graduating class at convocation December, 1921. I would like, however, to add a few remarks to what he has already said.

While you are connected with the hospital, you are a representative of the hospital and you can maintain a high standard, or you can lower the standard. You should be loyal to the hospital. Some interns feel that they owe everything to their attending man and that the hospital is a secondary consideration. This is a mistaken idea, for your attending man, after all, is only one spoke in the hospital wheel.

You should cultivate dignity, kindness of heart and a desire to serve. The patients soon recognize and appreciate such an effort.

There are many things that you with your training and daily experience in the hospital understand with perfect familiarity but which the patient does not understand; therefore do not assume that the patients should comprehend them without asking questions, but when they make inquiry of you, give them the courtesy of a reply as full and clearly as you can make it and without suggestion of superiority born of a greater knowledge.

Words are only one means of expression and manner (and I wish to emphasize that "manner" is quite as important); therefore, remember that a kind and gracious manner is not only the sign and mark of a self-respecting man, but is to your words what oil is to machinery in making them move effectively to their purpose. Always be willing to help whenever called on. Some of our most successful men of today (some of whom are present) were interns who were always alert to do something to help, whether it pertained to their service or not. You are an intern to gain knowledge. This you cannot attain by sleeping when you should be working.

Get the idea that you are a professional man and no longer a school boy. The superintendent will soon recognize this and treat you as such, for he does not like to bind you to a stiff set of rules. I do not mean that you should get the idea that you "know it all," for there will always be plenty of room for further progress in medicine. And you are an intern to learn. The nurses while in training are governed by the rules of the hospital, and the hospital is responsible for their conduct. The intern should respect these responsibilities and help the nurses to live up to the regulations of the hospital. There must at all times be close professional cooperation, however, for the benefit of the patient. Respect suggestions from the nurse for, because of their closer contact with the patient, their suggestions are of value and should receive your careful consideration.

Keep your work up to the minute so as not to delay the progress of your patients. You need the largest number of patients possible to get variety of service. Therefore, the completeness of your work, such as laboratory, history writing, carrying out of orders of your attending man, writing orders carefully so the nurse will promptly carry them out, calling attention to the superintendent any patient who wishes to remain when discharged, etc., brings about a greater turnover of patients. The Presbyterian Hospital cared for over 10,000 patients last year. If each patient had been discharged one day earlier, we could have cared for 700 more patients. I do not mean by this that we should send our patients home too soon, for the end-result of everything in the hospital is the patient, and our job is to cure him if possible.

VALUES

Cultivate a sense of values: first, the value of a human life; second, the hospital value.

You are an intern to learn, but do not become so absorbed in research that you lose sight of the human element in the patient. The emotional temperament of the patient, and many times that of the relatives, must be carefully considered. Study the psychology of the patient.

This is an age of specialties. The laboring man specializes, and all along the line men and women are specializing. We sometimes feel there is a tendency to overspecialize. Not long ago, I installed a new machine in our laundry. There were two water pipes and one steam pipe to be connected. The plumber connected the hot and cold water pipe, but would not touch the steam pipe, so I had to get a steam fitter. The plumber and the steam fitter both had to have an assistant to do the work, so it was more expensive to the hospital than it would have been had one man done the work. The medical profession, due to the tendency of the times, have assistants and other expenses that eat up their surplus; their overhead expenses are too high. This specialization in all trades and professions leads to commercialization. There is a tendency of late for some of the medical profession to commercialize. They sometimes overcharge the patient whether he can pay or not. Instances come to me through my social service department and other sources where the family is suffering for lack of funds, due to sickness and debts. The physician should weigh the situation carefully in such cases, for why cure one member of the family and send a bill that may mean cutting down the family rations to pay it and probably result in the children being undernourished and in need of medical care?

We also see doctors taking the place of the old-time barkeeper and willing to sell their manhood for a few dollars, by writing prescriptions for alcoholic beverages for patients who do not need

it. These members of the medical profession have lost their sense of value of American citizenship. They are not 100 per cent. American and the government is going to get them sooner or later. We need more 100 per cent. Americans to uphold the law for the protection of human lives and the health of our nation.

What the world needs today is not "an eye for an eye and a tooth for a tooth," but we need the Golden Rule. The hospitals need the Golden Rule; the medical profession needs the Golden Rule. An automobile accident case was brought to our hospital a few weeks ago. The driver of the car that hit him was intoxicated. He got his liquor at a drug store, on a prescription written by a doctor. If you write such a prescription, think of what the end-result may be. With the thousands of motor cars on our streets, you and I know that human lives are not safe when an intoxicated driver is at the wheel.

There are hospital values. Do not underestimate the huge sum of money for buildings, equipment and endowment fund that is invested. Do not underestimate the many years of service spent in building up a personnel. There is also the system of managing the various departments that has taken years to work out. Consider the value of all this to you as an intern.

You should have a sense of value of the supplies you use daily. If you hand a child a banknote in one hand and a Mother Goose picturebook in the other, the child will take the book. He has no sense of values. You as interns should step out of the Mother Goose age. If you cultivate this sense of values while an intern, it will help you in your practice in future years.

Do not be too reticent. If you see where there is extravagance, or you think something can be improved upon, communicate it to the superintendent. He will appreciate it and it will establish a better fellowship between you. Be considerate of the employees. Most of them have been connected with the hospital longer than you and they have their ideas of right and wrong as well as you. Report any inefficiency to the superintendent and let him settle it, not you.

Yours is the greatest profession for service to humanity. Do not waste your opportunity. The following are "Ten Commandments of Success" from Charles M. Schwab:

- Work Hard.
- Study Hard.
- Have Initiative.
- Love Your Work.
- Be exact.
- Have the American spirit of conquest.
- Cultivate personality.
- Help and share with others.
- Be Democratic.
- In all Things Do Your Best.

DR. HERRICK, THE TEACHER
ERNEST E. IRONS

Dr. Herrick is a teacher by education, by inclination and by practice. Following his graduation from the University of Michigan, he taught Latin in Peoria and Oak Park High Schools, and later began his medical course at Rush Medical College. He graduated in 1888 and entered upon an internship in the Cook County Hospital. While still in the County Hospital, it was generally recognized that here was a man of promise, with a superior education and unusual mind.

On completion of his service in the County Hospital, Dr. Herrick became the assistant of Dr. Charles Warrington Earle—a physician of large practice and experience—with whom he remained one year. He entered general practice, and later limited his work to consultations and office practice. Soon after leaving the County Hospital he began his teaching at Rush Medical College and at the Woman's Medical College. His long service as a teacher of medicine in Rush Medical College has been broken but twice, each time for a period of medical study in Europe.

His classes and clinics have always been sought by the students, who are attracted not alone by the thoroughness and clearness of presentation of the topic in hand, but by the charm of polished English.

To be a successful teacher of medicine, one must be a student of medicine. While Dr. Herrick was teaching medicine he was studying his patients, and the results of these studies with his students have been given a wider audience by the publication of papers on tricuspid stenosis, ulcerative endocarditis, sickle cell anemia, angina pectoris, and coronary thrombosis, to mention only a few. The observations on which these papers were based were made in the hospital, at the necropsy and the consulting room, and those of us who have been privileged to enjoy longer periods of close association with him have seen these topics grow slowly, surely, until they reached a point of completeness which, in the opinion of the master, justified their formal presentation. The interest of the investigator, combined with the caution of the conservative consultant prevented premature conclusions, and the publications of Dr. Herrick, like those of Theobald Smith, have stood the test of time.

From the clinic we go into the hospital for morning rounds, and the teaching goes on, largely by example—lessons of thoroughness in history taking and examination, lessons of consideration for the feelings of the patient, lessons in psychology—looking into the patient's mind to determine what secret fear or apprehension is causing him to color the description of his trouble.

And here in the hospital he utilizes his classical education in another way. To the Greek he speaks Greek, to the son of Naples he speaks Italian, and to some of us he "speaks Yiddish;" and when he thus speaks, each patient knows that he has found a friend. So far I have not heard him speak to patients in the language of Chaucer, nor in the dialect of Mr. Dooley, though we know that he uses both of these latter with the tongue of a native.

And now in the consulting room the teaching continues. The most profitable time of all, as his assistants will testify, is that all too brief period after a busy office hour, when the symptoms and pathology of an obscure condition are discussed, or the mistakes of the assistant pointed out.

In hospital, consultation or office Dr. Herrick rarely allows his composure to be outwardly ruffled. One occasion proved an exception to the rule, and had an unhappy ending. One busy afternoon an apparently well to do gentleman came to the office without an appointment, paced up and down the waiting room, and rushed to Dr. Herrick's door each time it opened, begging to be admitted next. To preserve a semblance of order in the waiting room and prevent a further scene, Dr. Herrick took him in and after a prolonged period of examination, gave his opinion and advice. Having got what he came for, the patient was now anxious to go, and casually inquired the fee. When he heard the charge, new and alarming symptoms of illness appeared, and the second period of discussion promised to be longer than the first. After more debate the patient cried, "Here, Doctor, take two dollars." At this point, Dr. Herrick's temper broke, and he exclaimed, "Rather than take two dollars, I would charge you nothing!" Whereupon the patient—"O, thank you, doctor, so much"—and out he went.

Dr. Herrick is by example a teacher also of his colleagues—lessons of forbearance, right living, judgment, tact and courtesy.

And in all and through all is the spirit of kindness and helpfulness.

Gentleman, scholar, teacher, beloved friend.

HERRICK—THE CONSULTANT

DEAN LEWIS

CHICAGO

It may seem superfluous, even presumptuous, on my part to speak of Dr. Herrick as a consultant. Most of you know of his qualifications from personal experiences. Anything that I may say will neither add to nor detract from the estimate that you have already made of him. The opinion has been quite prevalent—although I must say it is rapidly waning—that surgery represents the mechanical side of the profession that we practice and that, therefore, the surgeon is frequently in need of medical advice. It

has occurred to me that the committee having the program in charge, may have chosen a surgeon to speak of him as a consultant because they were suffering from this delusion. I am much more conversant with other sides of his character and might have revealed to you, if opportunity had been given, many secrets and more intimate phases of his life which have been overlooked or not even suspected.

As this is not a memorial service but a testimonial dinner given by friends on the eve of departure to balmier climes, where you hope to escape the rigors of the severest winter following the mildest autumn experienced in these parts during the last forty years, I may speak frankly of your faults as a consultant as well as of those brilliant qualities of mind and sturdiness of character which have made you probably the most frequently consulted consultant.

It has been my privilege to see our consultant develop. I matriculated at Rush Medical College in the autumn of 1896. Physiology was being doled out in minim doses two or three times weekly; the points of interest on the inferior surface of the petrous portion of the temporal bone were being demonstrated to us with deadening regularity and we were compelled to learn the doses and supposed action of all the drugs in the Pharmacopeia. In order to keep the faith I had to see some clinical medicine and I, therefore, early in the course made the amphitheater acquaintance of a dapper young man with sprightly step who does not look so much older tonight than he did then. In a clear concise way he demonstrated the clinical findings of disease. Because of his facile mode of expression, I imagined he must have had a classical education, not knowing until later that he had been a teacher of Latin. His method of presenting cases differed greatly from that of the professor of surgery, one of the greatest clinical teachers of his time. The simple, direct methods of the physician represented the new school—the oratorical flights of the surgeon—the old—the personality of each made the methods about equally effective.

A physician to be a consultant must be a keen, superlative diagnostician—must know human nature—must have a sense of humor and must realize his limitations.

In those early days this man gave evidence of his diagnostic ability which has increased with years until he has been a consultant whom we all need often. The most impressive thing to me about his diagnostic skill is simplicity and directness. After what appeared, even in the early days, to be a rather cursory examination, he would draw conclusions which were about right. His percentage of error was as low as or lower than that of other men who made what on the surface seemed to be more complete examinations. We are unable to judge of the different workings of mental processes. There are those who apparently delight in making wide detours. They enjoy the side roads and by-ways

much more than the main highway. The mind of our consultant went straight, making few, if any, detours. He could elicit in a few questions the principal symptoms which stood out *clearly* and unconfused.

I have noticed that in his writings he refers frequently to Louis and Trousseau. Evidently he has been considerably influenced by the teachings of these two great clinicians, and I, at times, believe that unconsciously, perhaps, some of the analytical qualities of Louis and the clinical sense of Trousseau have been handed onto him. I have seen but few men who apparently made diagnoses by intuition and the man whom we are attempting to honor tonight is one.

Diagnosis by intuition seems simple enough, but it is merely the result of the workings of an alert, orderly mind, well stored with beautifully correlated clinical facts. It comes after long and accurate observation of cases which have been studied in an orderly way and mentally classified. Clinical sense is not acquired. It is closely related to horse sense. It is, apparently, present at birth—you either have it or haven't it.

As I passed from student to intern days my amphitheater acquaintance became a personal one. As I then saw this developing man more frequently, I had more opportunity to observe him closely, and became more and more impressed with his diagnostic ability. I shall always remember one diagnosis in particular.

A supposed hero of the Philippine unpleasantness was admitted to Ward 8, in the County Hospital, one afternoon in the spring of 1900. He had a scar in the palate which, according to his statement, was caused by a rifle bullet. He had lost two toes on the left foot, whether accidentally, intentionally or in combat has never been determined. His temperature varied from normal to 104 F. within a few hours. He was so nervous that he would jump out of bed and land on his feet at the slightest noise—therefore the doors were protected and his ears were stuffed with cotton and large doses of chloral given for sleeplessness. I spent most of the evening and the early part of the night looking for malarial organisms and making Widals. The next morning the patient vomited what appeared to be a considerable quantity of blood. He was, therefore, put in a private room. Soon after Dr. Herrick appeared the next morning he was asked to see this unusual case. After making a quick examination he turned to me with the startling statement that this man was a malingerer. I felt a little sorry for our budding consultant, in fact rather pitied him for coming to such a conclusion in the face of such decisive clinical evidence. The patient was later shown in clinic and was offered money if he would tell how he manipulated the thermometer. He left the hospital soon after in high dudgeon, having been grossly insulted, being accused of malingering. That night he appeared at Dr. Herrick's house to claim the money. He said that the nurse

shakes the mercury toward the bulb after taking temperatures and that he merely shook it the other way until the mercury stood at the desired figure. I have never found out how he came to such a rapid conclusion in this case. The diagnosis may have been perfectly obvious to others but they did not say. It may have been due to my lack of clinical experience, but a few years later a physician, regarded as an authority on the anatomy of the nervous system, after days of study in an obscure case, located a lesion in the red nucleus and Dr. Herrick, after a few moments' examination, said that the lesion was in the head, all right, but that the patient would recover and leave the hospital with the advent of spring and more perfect traveling accommodations on fast freights. He was right again.

He took the greatest pleasure in showing that these patients were malingerers. His pleasure in exposing sham is not confined to those he meets in the practice of his profession. Pretense and sham are foreign to him, and when met in those with whom he comes in contact, antagonism and a desire to expose them is aroused.

He has a biting sarcasm at times under such circumstances, the withering power of which I do not believe he realizes.

He is the greatest exponent of simple direct methods that I know of. He carried at one time in his pocket a small case containing a hypodermic syringe which on numerous occasions revealed suspected, but overlooked, pleural exudates. The educated touch has always been one of his hobbies—and percussion carefully and precisely carried out by him as frequently revealed lesions which good, but less expert, men have overlooked. An extremely logical mind is the basis of his diagnostic ability and accounts for the frequency with which he is consulted.

The Gold Headed Cane, before being deposited in the corner of the library in the New College of Physicians in London, had been possessed by the distinguished Baillie. The Cane made some interesting remarks about Baillie. It said that in consultation Baillie was candid and liberal in the highest degree, and so industriously gave credit to the previous treatment of the patient, if he could approve of it, that the physician who called him never failed to find himself in the same possession of the good opinion of the family as he was before the circumstance of the case had made the consultation necessary. His manner of explaining the disease and the remedies recommended were peculiar to himself and singularly happy. This statement made concerning a great physician of the last part of the eighteenth century can be justly made of our colleague tonight.

Although developing into a consultant early and having been consulted so frequently—he has preserved, or even developed with years, a sense of humor with an abundance of which he was originally blessed. In his dictionary the word alibi is missing

I have frequently heard consultants say that the patient did not complain of what was found at autopsy, or the findings should have been so and so because of the history which they had elicited—having practically forced the patient to give a history which they wanted. Not so with Dr. Herrick—he has made mistakes—he is human, and some of his mistakes have been egregious, but I have yet to hear him make an alibi. Dignified, yet natural, simple, making diagnoses quickly, reassuring the relatives, comforting and encouraging the patient—he is the very antithesis of that ponderous consultant not infrequently seen whose ponderosity is frequently assumed to conceal the weakness in his diagnostic and therapeutic armor.

This humor is a constant source of wonderment to me. It has maintained his youth. He reads Chaucer at sixty, but can still enjoy the rough and tumble antics of Al Jolson, the child-like humor of "Chauvre Souris," or the broad wit of "Partners Again" and "Abie's Irish Rose" with equal zest.

He realizes his limitations—for that reason I have thought that he is an especially good consultant in a surgical case. His diagnostic ability and clinical sense may be required to solve a problem, but when he arrives at a conclusion, the carrying out of the suggestions, especially in the surgical field, is usually left to the man who has the experience upon which, if he has a mind at all, he should form a sound judgment.

In the last *analysis*—he consults and never attempts to dictate.

Dr. Herrick, in pre-Volstead days I would gladly have drunk a toast to you—but that ceremonial is past. I do, however, propose a toast which needs no artificial stimulation, for it is prompted by the affection, admiration, and regard we have for you—to your patients, a peerless physician—to your students, a brilliant teacher—to your friends, a sane philosopher—to your intimates, the best of pals—to your colleagues, a great consultant—in fact, a consultant to consultants—may you live as long as you want to and want to as long as you live.

JAMES B. HERRICK—THE MAN

WILLIAM A. PUSEY

"Oi see be the paipers, Hinnessey."

"You are always seeing be the paipers," said Hennessey.

"Well," said Mr. Dooley, "that's better than not seeing by anything, like some of me intimate frinds. But as Oi was saying, before your onsamely interruption, Oi see by the paipers that Doctor Jeemes B. Hirrick, the imminent internest, which is not an undertaker, Hinnesey, in the ordinary sinse of the word—I see

that Dr. James B. Hirrick is laving the city for the Riviera, in order to avoid the rigors of the climate of Chicago during April and May.

"It's a funny world, Hinnessey. I don' know ; there are a good many things I can't explain. I remimber something over 30 years ago when I was prospering—blessed be the Saints—in my club for the working man on Archey Road. I say, I remimber Dr. James B. Hirrick, the imminent internest, in those days. There were a good many byes in the Roosian Medical College who used to get down as far as Archey Road. I think they used to come a good deal because, by walking down there and back, they could swipe a lunch in me club with a 5c glass of beer that took the wrinkles out of the stomach, and so by the trip saved at least 5 cents. Anyway, I remimber Jimmy in those days. He was a cadaverous little upstanding runt, as lean as a wolf, with a stomach like an empty purse. When he had an overcoat he didn't know there were any rigors in the Chicago winter, and in the summer he avoided the discomfort of the heat by pitching hay out in the Des Plaines flats. As far as I could see, the best there was to him was to hope that some day he would get his diploma from the medical college—they were easy in them days—and then go out and pick up a living at a dollar per, at the utmost, from the Irish and the Dagoes and the Polacks, before the good Priest got hold of them for keeps.

"I do remimber that I was surprised to find later that the little cuss was getting board and keep in the County Hospital. But I have been in politics, you know, myself, Hinnissey. The bunch in that medical college, like all the foreigners, had a political drag. They might have gotten him in there. Of course, I knew he was a Swede, but the foreigners all hung together in those days, or I guessed he had a saloonkaper uncle in Oak Park that I didn't know about, who got him the job. Anyhow, he was there, and that is the last I heard of him; for, before he got out of the County Hospital, he quit coming for the free lunch—he never did care for the beer. I suppose he could feed in the Hospital and save the five cints. And later he didn't want to be seen in my recreation centre for the laboring man; he always was a bit proud and dignified. Anyhow, I lost sight of him.

"As I say, 'tis a funny thing what happens ; he disappeared from Archey Road and in about tin years he reappeared in the paipers. I have seen by the paipers, for years, that Doctor Jeemes B. Hirrick is laving for his summer home at Manchester in the mountains, or is taking a motor trip by automobile over the grand tour, or will be absent from the city for six months while he goes to Europe to rest his wary brain and frazzled nerves, by visiting the ruins and the battlefields on the Western front. When I knew the kid he rested his nerves—nobody thought of his brains then—by walking downtown Sunday afternoons and having a good look

at the Lake. Now, what's happened? The pull of a saloonkaper or some other powerful relation that I didn't know, didn't get him an automobile, didn't buy his tickets to Europe, and didn't supply his luxurious mansion in the mountains of New England, or wher-ever it is. No more does it furnish his easy pay when he goes off for the necessary rest now-a-days for that part of his anatomy that we never knew existed.

"I say, I don' know; and then again I do. I rember Jimmy was a pretty good sort of a bye even in those days. As I said, he was an upstanding little devil; he was good natured and peaceful, but he was detarmined and a bit touchy, and for some things a regular wildcat. He never could cuss fluently; it came hard to him; it was onnatural. Somehow you felt that the furniture was less likely to disappear from his room than is usual in the County Hospital. He didn't dissipate—unless you call ating my free lunch dissipation. He was, in fact, in a way a first class bye and everybody liked him. He was sarious minded and, while I never thought he would be good for more than a dollar per, if I'd been sick and didn't know anybody to sind for, I would have been willing to trust myself to him four or five years after he got out of the hospital, if I wasn't very sick.

"Since I have seen him in the paipers I have asked my own doctor, Doctor Dinnis Hogan, about him. Now, there is a full-size man. Dinnis, you know, is a fine looking fellow that looks like a rale doctor; but he has stuck to the one dollar per; and Dinnis, who doesn't know him very well and has no hard feeling against him, says that Dr. Jeemes B. Hirrick is a great consultant; which I understand means that he has gotten the nerve^{to} charge \$25.00 for a \$2.00 visit and, what's more, can get away with it. That he is a recognized authority on the fatal disases of the heart. Now he has more dignity than a bishop; he's grown whiskers; he was cultivating a crop of broom sage back in the County Hospital days. He has worn them carefully to concale his rale presence ever since. He has got a trace of an abdomen—a refined, gintimenly trace—and while he is still a runt, he stands up like a grown man. And wise! He doesn't have to know much—he looks that wise that he can put over anything; and he has what the doctors in my day used to call 'the finest bid-side manner' that ever gave encouragement in a hopeless case.

"Anyhow, he's done the trick. I say he was studious and a hard worker. But that doesn't account for it. There are lots of my old frinds of Jimmy's boyhood days who long since worked thimselfes to death—yes, I said worked, not drunk thimselfes to death, Hinnissey—and, whether Jeemes has worked hard or little, he has saved sufficient of himself to made recuperating on the Riviera. Now, how did it happen? I don't know. I haven't got a hundred miles from Archey Road since Jeemes was a bye—and I was not more than 30 years old then—and even then I was some-

body and I looked the part. How did Jeemes do it? I donno, Hinnessey, but I suspect he had something under his hat, and I hope he will enjoy the Riviera."

RESPONSE

JAMES B. HERRICK

You have seen in the daily papers the comic picture headed "Not a Brain Cell Working." The trouble with me at this moment is not that no brain cell is working but that *all* are working at once and in such lawless and irregular fashion that, by the time the ideas are generated and transmuted into words, much of the meaning and order will, I fear, have been lost. My present condition might be described after the analogy of fibrillation of the heart, as cerebral fibrillation.

You probably expect me to deny the truth of these good things you have said about me. Let me surprise you then by saying they are true—90 per cent. true. They would be true to that degree if said of any one of you who are here. You are all reasonably intelligent, honest and industrious. What makes the difference between individuals in the use that is made of that remaining 10 per cent.; that is what counts. I am not speaking of geniuses or epoch makers, but of plain doctors. One works systematically while others sleep or play and he forges ahead. Another, not content with what is now known, consumed by the desire to add to the sum of knowledge, in his quest for the new, traverses paths hitherto untrodden and is soon in the higher and purer atmosphere of research.

Another with sound judgment, a keen insight into human nature, an impelling personality that enables him to control men and situations becomes a leader, an organizer, an executive. To repeat, what distinguishes one man from another is the 10 per cent. of innate or acquired ability and the use to which it is put. How far I may have succeeded in making more than ordinary use of my time and talents is not for me to say. I have heard tonight of more good qualities of mine than I ever dreamed I possessed. If what you say of me is only measurably true I am glad I did not hear of it years ago. It would have made me self-conscious, and self-consciousness has robbed many a life of its happiness, wrecked many a friendship, and destroyed many a man's usefulness.

For some of the good qualities you have assigned to me I deserve little or no credit. Honesty? I was born into and reared in a family where honesty and other Christian virtues were taught and practiced as axiomatic. My good mother who at eighty-four regrets, as I do, her inability to be here, will when she hears from her sons what has been said tonight, bluntly say that you have

exaggerated many of my virtues but that others—she still views me with a mother's fondness for her first born—are not stressed enough. Just what her comment will be, I know not, but it will be an honest opinion, frankly expressed.

Industry! From the time I was tall enough to help harness the horse I was taught to work: to milk the cow, care for the horse, chickens and pig. Work in the garden and yard were tasks as much a part of the day's life as eating and dressing. My brother, four years younger, who is here tonight, claims he did the major portion of the work. In a sense he did! But his way of doing work makes me think of the man who said he had the boil in "the right place." When asked where was "the right place" he replied: "On the hired man." My brother's work was largely on, and through, the hired man. He denies this, but I am older than he; I was there, and I know.

A sense of humor! My father bubbled over with fun, saw the humor in even distressing situations, was a capital story teller and was known to all for his kindliness and geniality.

Environment has only served to add to and accentuate these inherited features. One could ask for no more high-minded, industrious, kindly men than have been my companions in college and professional work. Daily contact with men of this type tends still further to develop these characteristics.

Let me make some confessions to you. For years I have felt that by many my knowledge and ability were overestimated, though I have at times feared my motives were misjudged. Both these thoughts have hurt, for I plead guilty to being hypersensitive to criticism and opinion. I envy the man who serenely and without worry hears himself unjustly praised or criticized, and who rests content that the future will right the error.

Another confession: more than once reference has been made to my modesty and self-effacement. I hope it is true that these characteristics are mine. But I fear that at times what has passed for modesty was ignorance. I did not express a decided opinion as to what was the matter or what should be done because I did not know. Or it may have been timidity, or even cowardice. An over-caution, an ability to see both sides of a question—Mrs. Humphrey Ward speaks of this as a curse—has often made me hesitate to express opinion promptly or early to reach final conviction or to engage in aggressive action. Happy the man who is always sure he is right, sure of self. He is spared many disturbing qualms of conscience, many sleepless nights of worry, though he may oftener have to reverse his own decisions than does his more cautious colleague.

I am tempted to reminisce at length, but reasonable time limits, good taste, and the fear that garrulity will be interpreted as evidence of senility, will keep me from saying many things that might otherwise not be unappropriate.

As I look back over my past life I have few regrets. I have never regretted having chosen medicine as my life work, though in college days a tempting offer came to me to go into the insurance business, and though the study and teaching of English and literature made a strong appeal to me, and though an earnest effort was made by a saintly patriarch to induce me to become a foreign missionary.

I have never regretted having chosen Rush as my medical school. The grand men of my student days were, for their time, great teachers by precept and example.

I have no regrets because I followed the advice of my preceptor, the late Dr. J. W. Tope of Oak Park, Ill. To concentrate my endeavors in college on two things. "First," he said, "learn how to tell what is the matter with a patient, and secondly, study for the internship in the Cook County Hospital." This internship, with more than twenty years of later service as an attending physician, was of inestimable value, as all know who have had a similar experience.

I have never regretted that for eleven years I engaged in general practice, the best foundation for later specialization.

I have never regretted having in 1900 given up general practice for a more limited field in the way of office, consultation and hospital work.

I have no regrets at having written rather profusely in my earlier days and at being a frequent participant in the discussions in medical societies. I reread some of my youthful articles with amusement at the way they are written, may even wonder just why some were written, but I find little of which I am ashamed because of the content, little to retract. I sometimes wonder what might have been the effect on my career had a plan that Dr. Hektoen and I had for a work on the practice of medicine ever been consummated. At the time, and for long after, we were disappointed at the trend of events that made the publication impossible. As I view it now, fortune was probably kind to us.

I have never regretted having gone early into the work of medical teaching. To try to impart knowledge, to inculcate methods of study and medical thinking, to stimulate to independent study of medical literature, of patients, and disease problems has already been a joy. It has helped keep me young.

I have never regretted having refused offers to teach in other institutions than Rush College. Rush has seemed my home. A finer, higher-minded, more unselfish body of doctors than the Rush faculty I do not know. To have left them would have been my loss.

I have no regret at having in a feeble way done something outside of what is strictly medical. My association in the work of Lewis Institute, The Central Free Dispensary, Local and District Boards during the War, a State Commission for Investigating

Hours of Work for Women, and other enterprises have brought me new and prized friends and a satisfaction that comes from the sense of service for others.

Of course as I look back I find mistakes, hopes disappointed, goals not reached, ideas not attained, dreams not come true. But I feel that there have come to me all the rewards to which I am fairly entitled. I have no feeling of having been treated unjustly by the fickle goddess, Fortune. There is no bitterness in my heart as I contemplate the past, no unhappiness as I try to live rightly in the present or serenely look forward to the future.

Perhaps I may fittingly interject here a word of advice to the younger men, and I do this because I had to learn some of these lessons by experience. Lay broad and deep the foundations of general and scientific knowledge; in some line do intensive, concentrated work so that life is not dulled by monotonous mediocrity and, above all, work. Set your mark high, don't be in a hurry, do things in *your* way. Do not copy some one else, some hero of yours. You will probably merely ape his externals, and miss the essentials. Be yourself! And have courage to say "No" to offers that come, tempting because of financial return, prestige or supposed duty to the profession or society, if such offers involve a lowering of your standard, a distortion of your high ideal.

Friends! I knew you would say nice things about me. I have tried to brace myself so as not to be emotionally upset. But I must surely have a heart of flint not to be touched, and deeply, by your more than kind treatment of me. Please believe that I am grateful to you all, more grateful than I can, or dare try to express.

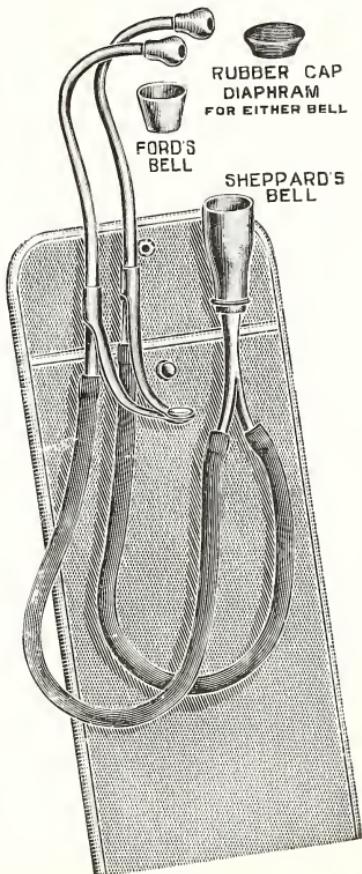
Just one word more. You could not have spoken of me as you have, had it not been that for forty years I have enjoyed the companionship of one of God's rarest creatures, a pure-minded, noble woman. What her counsel, her example, her inspiration, her love have meant to me is too sacred to be bared even before this audience of friends. She is unable to be here tonight; may I ask that you rise and thus silently join me in honoring my wife.

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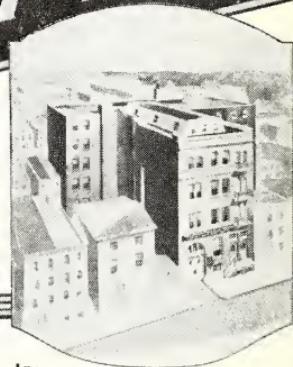
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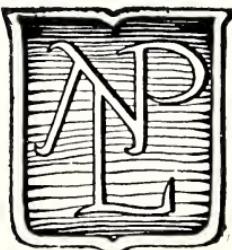
The ideal of laboratory service has changed during the past few years and neither the physician nor the laboratory itself is contented with a few routine examinations, issued without comment. Our desire is that of progressively more service rendered, a strong interest in each case, an effort to understand its peculiar problems, readiness to suggest further examinations and to discuss them and their interpretation and application. This kind of service is always ready for those who desire it, and in proportion as we render it we shall be more useful to the physician and thereby more beneficial to the patient.

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ORIGINAL**THE ANNUAL BANQUET****A TESTIMONIAL TO DR. FRANK BILLINGS***Held at the Auditorium Hotel, Wednesday Evening, June 11, 1924*

The annual banquet of the Alumni Association of Rush Medical College, held at the Auditorium Hotel, Wednesday evening, June 11, during the annual session of the American Medical Association in Chicago, was a tremendous ovation to Dr. Frank Billings, a recognition of his seventieth birthday and of the love and esteem in which he is held by every student and physician with whom he has come in contact. Almost a thousand persons assembled, taxing the accommodations of the hotel, and almost raising the roof in terrific, spontaneous outbursts of applause and enthusiasm. The ovation resulted, moreover, in an enthusiastic endorsement by the Alumni of the plans, which have culminated in success, for making Rush Medical College the medical department of the University of Chicago, establishing a postgraduate school of medicine under the name of old Rush, and making the alumni of Rush an integral part of the Alumni Association of the University. More of this is told elsewhere in this issue.

In the report of the banquet which follows the addresses are printed in the order in which they were given, together with the incidental remarks of the toastmaster, Dr. Ludvig Hektoen.

**INTRODUCTORY REMARKS OF DR. L. HEKTOEN,
TOASTMASTER**

We have before us a long program in which are mingled elements of unusual significance.

Good Old Rush is closing its doors as an independent medical school: this is the last graduation and the last annual dinner under the old regime.

Tonight the dominant figure in the college for the last 25 years makes his official exit, but we confidently look on this as only the first of many farewell appearances.

We are glad to salute again the friend whose name the Norman Bridge Pathological Laboratory will carry as the Rawson Building rises in the near future.

The University into which your alma mater merges is represented by its good and faithful servant, the president, under whose wise guidance the great change goes forward in a manner that inspires confidence and enthusiasm in all concerned.

Truly this is an extraordinary and stimulating occasion.

INTRODUCTION OF DR. B. W. SIPPY

The medical origin of the distinguished representative of the alumni association dates from that now remote epoch which historians designate as the latter part of the prelaboratory period in medicine. Nevertheless he recognized early that practical physicians only too frequently practise the errors of the forefathers; he also confirmed for himself the truth of the observation of Galen that "all men of learning and almost all dwellers in large cities suffer with their stomachs;" and accordingly he planned a course of action in which he has avoided the errors of the forefathers and greatly benefited those who suffer with their stomachs.—Dr. B. W. Sippy.

(Dr. Sippy made some humorous allusions to the burdensome duties of the presidency of the Association. He emphasized the interest of the Alumni in the plans for the new medical school.)

INTRODUCTION OF DR. MARTIN FISCHER

Dr. Hecktoen.—To call one so active as the next speaker "a voice from the past" seems incongruous, but he graduated, a mere slip of a boy, in 1901. He served as fellow and assistant in pathology while still a student. His work in physiology is an honor and a help to pathology. From the first he had a curious desire to investigate, and long ago he achieved the enviable power of stimulating others to hunt for weak points in his work, which thus exercises a sort of ferment action.—Dr. Martin H. Fischer.

A VOICE FROM THE PAST

MARTIN H. FISCHER

UNIVERSITY OF CINCINNATI

I have always despised the men who have too ardently believed and too publicly declared that all truth has sprung from the particular apron strings to which in their school days they were themselves attached. But because I have now these many years avoided putting myself in a class with them perhaps it will be forgiven me when, in the bosom of our family, I say what lies near the heart.

I used to pray, when over the water, that the Fates would spare me illness until in sight once more of the Atlantic seaboard and then utter a second supplication that lightning might not strike until the train pulled into Chicago. This is because I have the faith—born of many and varied wanderings—that the best medicine and surgery begins about here and spreads, sort of fan-shaped, westward to Seattle, Portland and San Francisco and northwards from a line which follows the old Santa Fé Trail. When you ask me why all this is so, it seems to me that it is because in this region live most thickly the children and grandchildren of Chicago's medicine; and Chicago's medicine has always

had in it the ingredients which make for good quality in the product—it has been individual, it has had in it self reliance and resourcefulness and it has always been afraid that it was not as good as it ought to be, which makes for effort, development and growth.

But Chicago's medicine is in major portion Rush's medicine. I am thankful that tonight's happy occasion permits us to greet, still in the flesh and at work, at least some of the men who made this western practice. Fenger, Senn and Murphy, whose unequalled teaching clinics should reappear in our medical curricula, are gone; with Etheridge died the most human of surgeons, with Haines the teacher of chemistry unequalled. We are glad that Norman Bridge sits with us as memory of the days when seven tailors were not required to make a diagnosis but just one man. And who brought all pathology into our western meadows but Hektoen; diagnosis, but Herrick; the human touch but Billings? Let me not praise too much. There is a newer generation worthy of all honor,—Sippy, LeCount, Bevan; Lewis, Dick, Post; Wells, Koessler, Irons, Woodyatt.

We are here to honor Rush, but perhaps in a truer sense it is not Rush but these men and those other of the two hundred of her faculty which time does not permit me to list who have really counted and really made our western medicine. Not institutions but men! And men who have been true to the most fundamental of the ideals of the university. Here have been—here are—men who have thought, and thought—*differently*.

II

We are hearing tonight of the death of the old Rush and the birth of the new in the University of Chicago—of new buildings and new types of professors. I wish that I had time to speak of the issues at stake; of buildings with their infinite possibilities as tools for the quick, or their larger opportunities as mausoleums for the dead; of the full-time clinical men—bound to be successes when Lewis or our guest Thayer are concerned, problematical when the product of hot-house or hospital pap, valueless for the purposes in hand if their skill as doctors or thinkers should come to be poured into the eternally enlarging administration sink.

We need constantly to fight the last named danger. Administration is the oil which keeps machines going, but machines which run ever so smoothly are worthless; what counts is their product. Perhaps I am bitter because I have seen too much of it and hear it urged on all sides as the panacea for every difficulty. It is like the connective tissue of a kidney. A little keeps the working parts together; a little more—if you believe the textbooks—strangles them; too much yields a mulberry.

May I be frank for a moment and say that, for a good many years past, I have heard much in that outer darkness where I have been a prodigal of Rush and the University in terms of administration—too much of boards, budgets and committees? These are the corporate forms of education. What makes them important, however, is something quite different. Wherefore I have welcomed the newer talk of Swift and Burton. If you would estimate the difference represented by the two things call off to yourselves the names of a dozen universities or a dozen medical schools and try to write the names of their presidents or deans opposite them. Wherever you succeed you are pretty sure to be naming a living thing and the carrier of an idea. Such alone made Gilman and Johns Hopkins—the Gilman who was followed by Hopkins to his home where in the space of a night the latter made over his fortune to build a university that ought to be and was not; Eliot and Harvard—the Eliot of his thirties called to Harvard to put into practice his magazine-voiced ideas on education; Angell and Michigan—the Angell who believed that higher education ought to be democratic and coeducational; Hall and Clark—the Hall who knew that productive men alone made a university; Harper and Chicago—the Harper wise enough to steal the Clark faculty bodily.

I hope for Rush that the ideals which made her great in the past will in the new home on the South Side be only strengthened. A president once asked me to suggest an inscription for the portal to his university. He did not adopt my suggestion nor have two others. Perhaps the new Rush will follow the Apocryphal text: "Come up hither and I will show thee things which must be hereafter."

III

In my ten minutes I have been asked to say just a word regarding the man whose labors run like a golden thread through Rush's tapestry of the past and the future—and in whose particular honor this table has been spread—Frank Billings. In intimate detail, as a worker among you and with you, you and a subsequent speaker know him better than I. I shall not touch upon his personality, his generosity, his humanness, his personal power. What I have to give is an outsider's viewpoint—a viewpoint strengthened, perhaps, by the affection of student for teacher but withal the impersonal one of the stranger without the gates.

Where in medicine and in medicine's roster of her sons does Frank Billings stand? I can answer best by saying that in the City to which I owe allegiance the history of medicine, since written character began, is graven into the frieze of one of our lecture rooms in the form of less than sixty names. That the novitiates of medicine may know their obligations there is carved above these names: "Enter ye into their gates with thanksgiving and into their courts with praise." In chronological order

Huang-ti, the yellow emperor of China, heads the scroll almost three thousand years before Christ. His spiritual successor, Chin Yueh Jen follows him a thousand years later with his "Hard Classics." Medicine goes to Hippocrates in the fifth century before Christ and five Greeks after him bring us to Galen and 200 A. D. Rhazes carries the banner into Arabia and not until fifteen Hundred does Paracelsus bring it to Central Europe. Twenty more names lift us into the modern period. When this is struck four Americans appear—Oliver Wendell Holmes for his work on the infectiousness of puerperal fever; William T. G. Morton for ether anesthesia; Theobald Smith as the discoverer of a carrier for infection; and—Frank Billings.

Let me pause to say why this name is here. If you will turn to any textbook of medicine which marks the close of the last century you will find therein at least one heavy chapter on diseases of unknown origin, on diseases designated as constitutional or metabolic, on diseases regarded as the "natural" consequence of what one of my friends calls the old guard—age and alcohol, hard work and worry, the strenuous life and lead poisoning—and that fine old list of the "idiopathic"—as though anything were idiopathic except ignorance. A newer text looks different. The heavy chapter has lost countless pages and where the origins of the enumerated diseases were interminable a clean set line tells all. The editor is Frank Billings and the clean set line is his principle of the focal infection. Corollary to the latter are all its consequences for pathology, clinical diagnosis, prognosis and medical or surgical treatment. It marks the largest contribution which any man has made in my day to the relief of human suffering. Pardon me if I make this assertion here. I do it because the principle, though born here, is better known, better appreciated and better used in many places than in Chicago. With the men whom Frank Billings has fired with the torch of his genius—I need but mention Rosenow, Davis, LeCount, Irons, Dick, Woodyatt and Post—muscular rheumatism, joint rheumatism, arthritis deformans, myocarditis, endocarditis, gastric and duodenal ulcer, cholecystitis without or with stone, infectious nephritis without or with stone, many non-ascending types of cystitis, various forms of iritis, various types of skin disease, various afflictions of the central nervous system and, I might add, vascular disease and diabetes have ceased to be the vague expressions of a wrathful god and become infectious in origin and the consequence of metastatically deposited emboli, the infection having been carried to the organs involved in the general blood stream, itself infected from superficially situated foci of infection resident in teeth, tonsils, accessory sinuses of the face, or elsewhere, and in themselves considered insignificant or unimportant. I need not weary you with a recitation of the labor, care and watchfulness of Frank Billings and his workers which permits us tonight to make

so smooth flowing a statement. Let me say merely that its consequence has been the complete reversal of many of our older clinical points of view and its utilization has altered in most significant fashion all medical, surgical and dental practice. Much of what was once idiopathic has now its clear-cut cause; diseases which once were believed to be naturally recurrent no longer recur; and a lot of those which, with time, were naturally progressive no longer progress.

The men of our frieze are the men who in their day stood apart as the terrible majority of one. I say that they are the guide posts which stand beside the road down which mankind rushes saying silently to it: "Henceforth you go this way."

We are hoping tonight that the biological estimate which gives every living thing a life span which is the square of its maturation cycle holds for us humans. If so, Frank Billings will live at least seventy years more. May he be spared this long not only to this circle of his friends but to that still larger one outside which in our time and in the times to come "loves art and holds genius sacred."

INTRODUCTION OF DR. WAKEFIELD

Dr. Hektoen.—We congratulate the members of the class of 1924 on the achievement of graduation and welcome its members into the medical fellowship. Henceforth you share in the responsibility for the right uses, the diffusion, and the growth of medical knowledge, and in this great task you will receive constant guidance from the example and teachings of him whom you have chosen to commemorate. Dr. Wakefield, of the class of 1924, who presents the class tablet.

PRESENTATION OF BRONZE TABLET

HOWARD WAKEFIELD

Mr. Toastmaster, Dr. Billings, Members of the Faculty, Trustees, Alumni and Guests of Rush Medical College:

To win friends and sincere admirers, to be idolized by his followers, to be a leader, is the privilege of but few men.

The class of 1924 has not had instruction by Dr. Billings either at the bedside or in the clinic, but through his associates and students, through his writings and through occasional personal contact at the various college functions, they have learned of his unselfish interest in medicine and medical affairs, of his character and ability, and particularly his sympathetic helpfulness to students, interns and young physicians.

As a token of their appreciation of and loyalty to their alma mater, the class of 1924 presents to the trustees and faculty of Rush Medical College of the University of Chicago this bronze tablet of Frank Billings.

INTRODUCTION OF DR. JAMES B. HERRICK

Dr. Hektoen.—At this point a word of explanation is necessary. Last winter a complimentary dinner was given to the next speaker, a favorite son of Rush, who thereupon disappeared. Traces were found of him in the Peter Bent Brigham Hospital in Boston, and finally he was located in Rome. It was feared that the effects of the dinner had gone to his head, and such seems to have been the case, if only temporarily, because in April a postal was received from him in which he writes: "Had my hair cut March 29 at 9:35 a. m."

It seems now that the trip to Italy had been planned for some time, because he is known to have studied the Italian language diligently, and today I learn that in passing through New York he tried his best Italian on an organ grinder, but without any effect; he was greatly comforted, however, when the monkey offered to shake hands with him. Dr. James B. Herrick, to receive the class tablet.

FRANK BILLINGS

BY JAMES B. HERRICK

Rush Medical College thankfully accepts this tablet and promises to keep it carefully. It is fitting that it should be placed in the college so that it may call to the mind of future generations the features and work of Dr. Billings.

To us of the present generation, however, no tablet is necessary. The thought of his warm personality and of his worthy deeds will never fade from the memory of those who knew him in the flesh. The new Rush Medical College as well as the hospital and medical school on the Midway, the enlarged and remodelled Presbyterian Hospital, the Durand Hospital, the John McCormick Institute for Infectious Diseases, the Sprague Institute; and the no less real, though less tangible, higher standards of medical teaching and hospital practice, the richer laboratory and research opportunities, the more stimulating atmosphere about Rush—all these are his monuments, for in these enterprises he was a leading spirit, and in general *the* leading spirit. Many owe their inception and successful operation directly to him. We, therefore, need no tablet as reminder. We may look about us and see his monument.

Mr. Toastmaster: For several years, perhaps since the death of Christian Fenger, the most powerful influence in medical Chicago has been Frank Billings. For several years, say since William Osler left for England, one of the most powerful influences in American medicine,—I believe the most powerful,—has been Frank Billings. When I say influence I mean influence for good. What qualities have given him this leadership?

Daniel H. Burnham, on seeing Dr. Billings for the first time, in a room crowded with people, asked with keen interest "Who is that man? A strong face! a forceful man!" An almost instinc-

tive tribute from one man of strength to another of the same type! I asked the mother of a child whom Dr. Billings had just seen with me—she was a woman whose ability to read character at sight seemed almost uncanny—"Now that you have seen Dr. Billings what do you think of him?" She replied, "What particularly impresses me is that he has a kindly face. I am sure he is a kindly man."

I once expressed surprise at hearing Dr. Billings sing. "Did I never tell you," he said, "that one of my ancestors got up the first hymn book in New England? Yes sir, the old Bay Colony Psalm Book was gotten up by a Billings. I was so pleased to learn this that I concluded to look up my family record. But in the course of my genealogic studies I ran on to the statement that one of my ancestors in England had been hung as a horse thief. Then I lost interest. I pursued the investigation no further."

Do not these incidents indicate some of his strong qualities? A striking physique, an eye, a jaw, a hand, a gait, a gesture, an intonation that betoken power; yet an eye that can dim with the tear of sympathy, a hand that can examine or lift the sufferer tenderly, a voice that can speak gently,—strength with kindness. And blood seems to tell, for is there not in him some of the rugged honesty, the stern justice, the religious fervor of the Puritan ancestor who yet had yearnings after the beautiful in nature and in art as he sang his songs—or admired the beauty of forest or shore? And the horse thief! Maybe after all, to speak in Mendelian phrase, this is the dominant inherited quality. For is not your horse thief, forsooth, a man of courage and boldness, of adventurous spirit, ready to do battle for self or friends or his own good cause as he sees it, even at the sacrifice of time, comfort or life? And is he not a good judge of men as well as of horses?

A man therefore, of force, kindly, honest, courageous, acquainted with men and things as they are:—such a man is a leader.

If you were to ask Dr. Billings what had brought him the greatest pleasure in life he would answer, I believe, the accomplishment of a task by work, the finishing of a hard job.

He learned it on the farm. Here he learned the lesson that patient plodding brings the result. I can see him a boy of 12 or 14, starting out early in the morning, and all day till sundown, or as long as the horses can pull, patiently, perhaps not always happily, plodding along after the plow and turning over the earth furrow by furrow, hour after hour, until the entire field has been gone over. As he straightens up his aching back and looks where the last furrow is laid there comes the thrill of satisfaction at a task finished, the same satisfaction that came when in the mid-summer or autumn he reaped the harvest from that field or, years later, emerged with triumphant face from the operating room

where the surgeon's knife, guided by his, Dr. Billings', carefully worked out opinion, had removed the diseased organ and had saved a life; or when, of riper age, he saw in print the results of years of painstaking, judicial study of focal infections, results that put new interpretations on old phenomena, stimulated to fresh investigations, results that in their influence may truly be said to be epoch-making.

Do not attribute his success—and I am speaking especially to the younger alumni—as practitioner, consultant, teacher, investigator, builder of institutions and hospitals to luck, or favoritism, or wirepulling, or some semi-divine gift. Remember the hard, hard work. He has for years been an example of tireless energy that has put most of us to shame.

These qualities in him are combined with a rare but refreshing common sense, good judgment, wisdom, sanity, and a big way of looking at things. When he has come into consultation over the puzzling case of illness, or has tackled some complicated problem in college policy, public health or hospital reform, he has revealed his quality of leadership by ignoring petty details and trivial non-essentials. He has shown not only knowledge but wisdom. His greater mental stature has enabled him to command a wider horizon than is vouchsafed to others, he has seen things more nearly in their proper relationships. He has taken the broad view. He has been the big man mentally as physically.

He is a fair man in his dealings with others, generous and just. He is loyal to his friends. I have heard him criticized because, it was said, he favored his friends, his college colleagues, his faction in city or national medical organizations. I challenge anyone to show that in favoring his friends he has done aught except what was, or what he honestly believed to be, for the best interest of medicine as a whole—doctors in general practice, specialists, laboratory workers, medical students, patients,—never forget patients. No man has more conscientiously or unselfishly striven to work for the public good. In medical societies, in public addresses, as officer of the American Medical Association his work has always been along these lines.

Dr. Billings is a man who has initiative and he is an executive. He conceived plans and often big ones. They possessed him and gave him a driving force that most men lack. He put things over because he had confidence in his plans, confidence in his own power and inspired confidence in his colleagues. He led, others willingly followed.

Emerson, I believe, says it is a wise man's privilege to denounce in the evening what he has warmly advocated in the morning. It is his privilege to be inconsistent, to change his mind. It is hard to forget old things. It means progress. Dr. Billings could forget and could change for he is progressive.

He helped young men by money, by advice, by giving opportunity, by inspiring example. There is a Billings group of men—a Billings school you may call it,—of whom any one would be proud, men of promise, of accomplishment, men of the same high standard of medical ethics as their master, men with whom character counts, leaders of thought, men who respect and love their chief. When they talk about "the old man" they are speaking in terms of affection. These men will tell you how they have learned from him. And he likes his boys and will tell you how much he has learned from them. The equation that expresses all such contacts between young and old must show a reversible reaction. Dr. Billings is young in spirit and mind, largely because he has kept close to the boys.

And withal his simplicity, his sincerity! In the tenement of the poor or in the drawing room of the elite, always plain, unaffected but courtly Frank Billings. Prosperity hasn't spoiled him, ill health, loss of those dear to him, malevolent and unjust criticism, temporary failure of effort have not discouraged or soured him. He is just the same hopeful, courageous, simple, friendly man that he was twenty—yes, fifty years ago.

And how many friends he has! In this city, in the country at large, you will search long before you find one with more. And how he inspires confidence! Said the late Reginald Fitz to me, "How does Dr. Billings get his millionaire patients to do as he wishes them to, to go to bed, to submit to operations, to drop business." "Well," I replied, "there is a unique personality there, there is a direct manner, a look-you-straight-in-the-eye way, but it is largely because he treats the millionaire as a man who is ill and not as a millionaire. He is not in awe of his millions, is not dazzled by the flash of money, and honestly tells the rich as well as the poor what, under the circumstances, must be done and he is believed and obeyed."

I have known doctors who were more brilliant and gifted than Dr. Billings as investigators, more fluent as speakers on the platform or in the arena of the clinic, more skilled in technique of special or instrumental examination, more learned in the book knowledge of medicine and cognate science, more of geniuses in some respects. But I have never known, and do not believe you have known, one man who possessed so many of the qualities of greatness and to such a degree as Dr. Billings, and who was with it all so human. He is the biggest, best balanced, all-round doctor we have ever known.

When the true medical history of Chicago comes to be written, high on the roll of fame will be the name of Dr. Billings. He is to be numbered with the three others whom we regard as the most potent influences for good in medical Chicago. Those great men of the past, the cultured and learned pioneer, Dr. Brainard, the founder of Rush Medical College; N. S. Davis, the forceful

iconoclast who broke the old time idol of medical education and started what is now Northwestern University Medical School; the beloved Christian Fenger who introduced scientific habits of thought and practice into the northwest. These three will gladly welcome as their colleague and their equal this man of force, of courage, of initiative, of high ideals, who had vision and who accomplished.

Several lantern slides, furnished by Dr. Geo. H. Coleman, were here thrown on the screen, showing Dr. Billings as a youth of eighteen, an intern in the Cook County Hospital, a successful practitioner, a teacher, president of the American Medical Association, an army officer in active duty during the late war. He was also seen at play with his mother, his daughter and his grandchildren.

Dr. Billings we honor you for what you have done, we love you for what you are, and we hope and pray that in your old age there may be no cloud, no storm, no biting cold, but just pure sunshine and the mellow autumn tints of a long, long Indian summer.

INTRODUCTION OF DR. BILLINGS

Dr. Hcktoen.—To one part of Dr. Billings' labors special reference should be made. I refer to his efforts in promoting investigation. His imagination was touched early by the glory of scholarship and by the power of the quiet worker who stands behind all great advances. He was instrumental in founding the McCormick and the Sprague Institutes, and is the first president of both. Dr. Wells, the director of the Sprague Institute, will support me I know when I say that these institutions have been and are aided in their work more than we can tell by standing so to speak "in the shadow of his great protection," and speaking for all the workers we now thank you, Sir, for all you have done to help us and to smooth our way.

In the same whole-hearted and effective manner Dr. Billings has cooperated in all constructive movements within his range. His entrance into a movement always gives it fresh vitality, and I have observed that usually his judgment is accepted as final and that usually his suggestions are followed.

It is said that years ago a patient presented himself to Dr. N. S. Davis, Sr., for examination. Dr. Davis looked him over, shook his head, and announced: "I am sorry. I can do nothing for you. You need the Great Physician." Whereupon the patient said: "Oh! I have seen Dr. Billings already!" Dr. Frank Billings.

ADDRESS IN RESPONSE

FRANK BILLINGS

Mr. Toastmaster, President Burton, Fellow Alumni and Friends:

This testimonial banquet given in my honor and the many kind and generous things said of me by the speakers so overwhelm me that it is difficult to collect my thoughts and to speak unemo-

tionally to you. I must accept as sincere the splendid things said of me, but at the same time I fear my friends have shown lack of good judgment in their estimate of me and my work. A month or more ago it was intimated to me that this Faculty-Alumni banquet was to be given in my honor, but I did not anticipate anything like the splendid testimonials which have been given, nor that so large a number would attend these festivities.

To the members of the class of 1924 I feel that I must first express my deep appreciation of the honor conferred on me in the presentation of the artistic portrait in bronze donated to the college and to find a place therein among the great men of the faculty who have passed to the great beyond. I am gratified that a miniature replica of the medallion has been made in bronze which every member of the class will possess. I hope the members of the class will use this miniature portrait as a paper weight with the conceit and hope on my part that they will recall often the statements I shall make. It has not been my good fortune to meet the class of 1924 as a clinical teacher, but the graduation of the class marks an important event in the history of Rush Medical College, as the medical degree given today is the last time that it will ever be conferred by the college. It is not surprising, therefore, that I and the other members of the faculty should view this class with a particular sentiment and unusual regard because the graduation of this class marks the triumphant accomplishment of a program in medical education which was begun twenty-six years ago.

I congratulate the class on this distinction and each one of you because you are beginning your life's work at a wonderful period in the history of medicine. I hope that each one of you recognizes the responsibility which confronts you if you are to justify yourselves in efficient service to the public. I hope each one of you, or at any rate the majority of the class, will take up the general practice of medicine rather than a specialty because I believe that the practice of general medicine affords genuine satisfaction and contentment of spirit far beyond that of any other form of medical service to the public. Doubtless each one of you has contemplated the future and especially the financial and other reward which may come to you. I want each of you to remember this statement when you view the medallion. If you continue to study and remain qualified and if you will give whole-hearted efficient service to the sick and injured who come to you, without a thought of financial reward, you cannot keep the people away from you and a large number of them will be willing to pay you more than you ask. Suppose I put it in other language, a quotation from an English writer of more than one hundred and fifty years ago: "The pathway to the door of the man who gives qualified and efficient service to the public is worn smooth by the passing of many feet." In other words, give your mind and your

heart wholly and efficiently to those who seek your services and you will be rewarded far beyond your expectation.

Do not look on money as a necessary means to your professional advancement during your youth and I hope the accumulation of wealth will not be an ambition with any one of you. I am sure you and the remainder of the audience will pardon a statement which I wish to make in the correction of misinformation concerning my own affairs. I know that many people of Chicago and elsewhere believe that I have always enjoyed financial means and have, therefore, never experienced the hardships and privations of the poor and struggling student. The truth is that I never possessed a dollar that I could really call my own until ten years after I had received the degree of doctor of medicine when I was nearly thirty-six years of age. In those years of struggle the hardships and privations were many, but I can say consistently that they were the happiest of my life. It is my belief that any young man and woman who is poor, who has good health and who has ambition to attain a desired goal, will accomplish this with greater distinction than many students who have ample financial means.

Tonight we are celebrating an historical event. I am sure that the heart of every alumnus of Rush Medical College glows and each one is satisfied and happy that the work of twenty-six years is a great accomplishment in behalf of higher standards of medical education. The long and honorable career of Rush Medical College does not end tonight; it begins a new era of honor and glory which it will share in perpetuity with the University of Chicago. The College is now a part of the University of Chicago and by action of the Alumni Council of the University of Chicago and the Alumni Association of Rush Medical College the two organizations are amalgamated, and best of all, the name of Rush Medical College is to be perpetuated in this union.

The union of Rush Medical College with the University of Chicago is an accomplishment creditable to many men who have worked wholeheartedly and loyally in the solution of the difficult problems which faced them twenty-six years ago. Of these men, President William Rainy Harper stands out preeminently as a man of vision, of sympathy and of understanding of the need of improvement of medical education in the middlewest, and indeed of the whole country. Dr. Harper passed to the great unknown in 1906, eight years after the affiliation of Rush Medical College with the University of Chicago, but in that short period of time he acquired a better knowledge of the fundamental principles which underlie medical pedagogy than any other man interested in our work. One cannot praise too highly the unselfish, broad-minded and loyal work in the early and subsequent days of the affiliation, of Ephriam Ingals, E. Fletcher Ingals, E. L. Holmes, DeLaskie Miller, Henry M. Lyman, James H. Etheridge, Nicholas

Senn, James Nevins Hyde, Norman Bridge, Christian Fenger, Daniel R. Brower, Walter Stanley Haines, David W. Graham, Ferdinand C. Hotz, William T. Belfield, Ludvig Hektoen, E. R. LeCount, John M. Dodson, Arthur Dean Bevan, James H. Herrick, Henry B. Favill, Bertram W. Sippy and other members of the faculty. Indeed the services and loyalty of the younger members of the faculty during this trying period of the history of Rush Medical College must be emphasized. With uniformity each member of the faculty has spent the required time in teaching without financial reward, but surely with great satisfaction in the knowledge of efficient service rendered. Personally it is a great satisfaction to me to know that the efficient work of the members of the faculty is recognized and that opportunity will be given to continue in the work under the jurisdiction of the university and that ultimately each will receive greater reward than he has in the past.

But, while we acknowledge and praise the members of the faculty for the work accomplished since the affiliation of the college with the university, we must not forget that the foundations of the college were built by men whose names are now rarely mentioned. But for the solid foundations built by them, Rush Medical College could not have reached an eminence as an institution of medical education which justified the affiliation of the College with the University of Chicago in 1898. Of these men who founded and built Rush Medical College on a solid foundation, we may mention Daniel Brainard, Joseph W. Freer, Moses Gunn, Jonathan Adams Allen, DeLaskie Miller, Robert L. Rea, Charles T. Parks, Joseph P. Ross, Edward L. Holmes, William H. Byford, J. Sydam Knox, and to these names should be added some already mentioned—Ephriam Ingals, Henry M. Lyman, Norman Bridge, James Nevins Hyde, E. Fletcher Ingals, Nicholas Senn and James Etheridge. Of these great educators and character builders, but one remains, one whose name is indissolubly connected with the College as a teacher, as a promoter of science and a benefactor of mankind who graces this occasion with his presence, our teacher, our collaborator, our friend—Dr. Norman Bridge.

Graduates of Rush Medical College of recent years have little or no knowledge of these men who deserve so much of the college which they built. The names of a few are perpetuated by endowments established by themselves or by others and among these can be mentioned Nicholas Senn, whose generous benefactions to the College are evidenced by Senn Hall, the Nicholas Senn Professorship of Surgery and the Nicholas Senn Fellowship in Pathology; the James Nevins Hyde endowment in the Department of Dermatology, a gift of his patient and friend, Mr. A. D. Thomson; the Ephriam Ingals chair of therapeutics endowed by himself; while other members of the old faculty, Joseph W. Freer,

Henry M. Lyman, E. Fletcher Ingals, DeLaskie Miller and Walter S. Haines are memorialized by very small endowments contributed by their relatives or the alumni which are wholly inadequate in the annual income commanded, as measured by the splendid qualities of mind and heart of these men.

At this time of rejoicing, is it not meet that we should give thought to these great men and ask ourselves if we should not start a movement which will honor them as they deserve? At the alumni meeting held this evening I had the honor to bring this question to the attention of those in attendance. It was the unanimous opinion of the alumni assembled that each year the alumni should establish an endowment fund of approximately five thousand dollars which should be perpetuated by the university and the annual income applied to that department of Rush Medical College of the University of Chicago or of Rush Postgraduate School of the University of Chicago in which the memorialized member of the faculty labored during his lifetime. This year by unanimous vote, the alumni decided to establish a five thousand dollar endowment in memory of Jonathan Adams Allen and before the end of the meeting two thousand, five hundred dollars of this fund was subscribed. I am sure that alumni who are present at the banquet and who did not attend the meeting of the alumni association will endorse this movement to honor Professor Allen who was respected, revered and loved by his students. I am sure it will not be considered out of place for me to request the alumni to make a subscription to this memorial either tonight or at an early date when they shall have returned to their homes.

Next year I hope the alumni will again choose a member of the old faculty to be so honored and to continue this effort year after year until all of these splendid men shall have memorials at the college which will fitly perpetuate their names and the work which they did for medical education.

To the alumni and friends gathered here I give my heartfelt thanks for the honor you pay me by your presence and by the apparently sincere expressions of approval which you have manifested when so many good things have been said of me.

To the class of '24 I again offer my appreciative thanks and wish them Godspeed and success as they go out to begin their life's work.

To my colleagues in the faculty and to those who have spoken tonight, I thank you for your many kindnesses and your generosity and your forbearance with me in the years that are gone. Because of our singleness of aim and the difficulties which stood in the way, I think that I may say we were more than colleagues; we were friends and brothers engaged in a great undertaking.

To Professor Fischer I owe much since he left the doors of Rush College. In the name of the faculty and personally, I thank

him for returning to his alma mater to give an address to the graduating class. I heartily thank him for what he has said of me tonight.

To you, President Burton, I offer especial thanks for the honor you do me in attendance upon this banquet and I especially request that you extend my thanks to the Board of Trustees of the University for the splendid wisdom and judgment expressed in your election to the presidency of the University of Chicago.

And now finally, my fellow alumni and friends, this splendid testimonial to me marks the end of my official relationship and obligation to Rush Medical College. It does not mark the end of my interest in or if acceptable, my work for the college. I cannot be shelved so easily. Therefore, in the future you may expect to find me working in the ranks in the quiet, retiring and submissive way which has characterized my actions in the past.

INTRODUCTION OF PRESIDENT BURTON

Dr. Hektoen.—The great dean retires, but the work will be continued by the heirs of his labors, his vision and his benefactions.

Our university is guided by a careful policy of plan and preparedness as distinguished from a policy of drift. Definite points of view are developed from which future problems can be approached safely.

Some one has said that the most powerful factors at work in human society are clear ideas in the minds of energetic men of good will. A man of wonderful energy, of clear and sound ideas, and of supreme good will is your next and last speaker—President Burton.

THE UNIVERSITY OF CHICAGO PRESIDENT ERNEST D. BURTON

On behalf of the University, I want to extend to you—professors, students, and alumni of Rush Medical College—a hearty welcome into our community and fellowship. This long-desired consummation of the hopes of many years is by far the most significant and important event of the history of the University during the past year. In rendering its opinion in approval of the agreement between Rush Medical College and the University, the Supreme Court of Illinois took occasion to praise the wisdom and broad-mindedness of those who were responsible for thus bringing into the University itself a work carried on so long and so successfully, first in independence and later in affiliation with the University. You may be sure that the University is keenly appreciative of the high traditions and enviable record which Rush Medical College brings to this new alliance, and that it will do the utmost in its power to make this union productive of rich fruit for the cause of medical education.

THE BANQUET TO DR HERRICK

The last issue of THE BULLETIN was devoted largely to addresses discussing the contributions of Dr. James B. Herrick to medical science, and to Rush Medical College and the city of Chicago particularly. The rush of publication, complicated by the exigencies of space limitations, prevented the inclusion of all of the addresses delivered at the banquet, which was tendered to him before his departure for a trip abroad. Worse than this, however, it prevented the inclusion of any explanatory note,—such as this is attempting to be,—explaining that these addresses constituted a testimonial to Dr. Herrick on a trip abroad, a temporary rip, rather than a departure to a permanent home. The addresses omitted—by Drs. Hugh T. Patrick and Robert B. Preble—follow.

**THE CONTRIBUTIONS OF DR. JAMES B.
HERRICK TO LITERATURE**

ROBERT B. PREBLE, M.D.

When the Master of Ceremonies told me that I would be expected to speak on Dr. Herrick's literary contributions to medicine, two thoughts immediately occurred to me: first, that no complete or even approximately complete review was possible because the time limits proper for an occasion like this were too narrow, and second, that with this audience no review is necessary because every one of you has read, as I have, every contribution Dr. Herrick has made and will read all that he may make in the future. We know, whenever we see Dr. Herrick's name at the top of an article that we have in hand no iridescent bubble filled with hot air, but a real addition to knowledge which we cannot afford to miss. I shall point out two striking characteristics of Dr. Herrick's writings without in any way apologizing for repeating what the previous speakers have said.

One cannot read anything of Dr. Herrick's without being struck by the purity of his English, a striking characteristic in this age when so generally one reads poor, and what to my mind is worse, discursive English. I presume that the purity of his diction is a product of his fondness for and knowledge of the ancient classics, particularly the Latin, and in part of his fondness for the best in English literature. Not that this reading is confined to the classics, for it is not! His taste is as broad as that of Christopher Morley, who says of himself that he can read and

enjoy anything from the *Odyssey* to the *Argosy*, as inclusive a range of reading as anything I know.

The second characteristic of Dr. Herrick's articles, quite as striking but more important, is his clarity of thought. Years ago, as a junior intern at the "County," I came for the first time into contact with Dr. Herrick and was able to appreciate the care with which he extracted the history from each patient and the thoroughness of his examinations, but I was then too young to fully appreciate the clean cut logic with which he built his diagnosis on these two groups of facts. Realization of this came later, only after wider personal experience and personal contact with other teachers. Never, in all the thirty odd years which I have known him and numbered him among my very good friends, have I known him to be guilty of the worst crime of a scientist, i. e., intellectual dishonesty. He has never refused to look an unpleasant fact in the face, nor has he ever embraced a glittering fancy. Always with his feet on the ground, he has gone on following the path of truth, and I am certain that were he to rewrite all of his contributions to medical literature, he would have reason to make but few changes. I suppose that he has had fewer occasions to change his mind, once having made it up, than anyone else in this room.

In closing, Dr. Herrick, I offer you my sincere respect and affection.

DR. HERRICK: THE PHYSICIAN

HUGH T. PATRICK, M.D.

Now and again the insidious and monotonous march of time is marked by days peculiarly our own; sombre days we like to forget and red letter days of lasting joy. Of course today is for all of us a four plus joyous one, especially happy for me because I am allowed to say something of Herrick the physician. Irons has explained that he is a most unusual teacher. Lewis will show that he is a most satisfactory consultant. Preble will say that he is an author of distinction and Pusey will tell us what a fine man he is. But through it all, over it all, first, last and all the time, he is the physician: a great physician; a beloved physician. And to this he owes his distinction.

To become a great physician requires more than a modicum of brains, untiring industry, a heart full of devotion to the work, staunch loyalty to the calling and some other things; among them an appreciation of values. And this no man can have without clarity of mind and charity of mind,—a so much bigger thing than charity of purse. Our honorable guild is a bit overburdened with well-meaning souls seraphically sailing in rickety airplanes, ecstatic over pseudoscientific visions. Herrick has his doctor's

mind attuned to realities and always his feet are on the ground.

Very rarely can one be a good physician, never can he be a beloved physician, without a fondness for his fellow man. To love his science and be devoted to his art is not enough. He must have in his fibre something of the kindly shepherd and much of the brotherhood of man. In some form or other he must be able to say with the great apostle "Though I speak with the tongues of men and of angels and have not love, I am become as sounding brass or a tinking cymbal." How familiar Herrick may be with I Corinthians XIII, 1, I do not know, but his patients and his colleagues will agree that he practices what Paul preached.

That the expert physician must be a master of technicalities goes without saying. The lesion may present a fascinating problem, the solution of which is a joy and a triumph. But the *great physician* has a larger asset: a comprehensive grasp of the human organism as a microcosm. When the big war came along and put a lot of us more or less into the army we gathered fruits as polymorphous as ourselves. For some of us the shoulder straps and the title were the sweet reward. Some gloried in the chance to command. Some plucked a trip abroad and a few acquired a new store of medical or surgical knowledge. But the men who really got the golden prize were those who brought home with them a broader view of human kind and a deeper insight into the hearts of men. This capacity to seize and evaluate the human factor while doing technical work must be the happy gift of some guardian angel. And this was given to Herrick. Amid the clamor of damaged organs and through the clouds of disordered function Herrick can see the interesting vagaries of character and the amusing whims of personality. And by that same token sometimes he can see grandeur in the slums and nobility in the Ghetto.

To become a doctor means to assume certain obligations,—and we don't need the Hippocratic oath to indicate them. To become a *prominent* doctor implies additional obligations and heavier responsibilities. Inevitably he serves as a pattern for students and young practitioners. For the laity he represents our profession. His methods of work, his attitude towards the patient and the patient's friends, his ethical standards, his financial trends are closely scrutinized. Even the language he uses, the matter of punctuality and habits of personal cleanliness are not without influence and make for weal or woe. These obligations our friend has discharged.

I may be repeating what Dr. Irons has said better than I can, but I am bound to repeat that one of the obligations of a prominent physician is to perpetuate the species. That is, he should be in honor bound to help, to guide, to develop the coming generations of practitioners. Every one of us can look back to one or two or more big men who gave us of themselves; who gave us something which has become as much an integral part of us as have

the chromosomes of the fertilized ovum. And this something we as surely pass on to our colleagues and our followers and our patients as we do our own traits to our children. So long as the race is propagated or our descendants continue in soul or body these things will live. They can not die. Here is an immortality, concrete, palpable, visible, practical, requiring no dogma, no faith and no theory. And to the goodness of this immortality Herrick has contributed largely and is adding something every day.

One of the things I know you want me to say about Herrick, the physician, is that we admire his courage. Frequently I have thought that courage is the first requisite, the one indispensable component of a great physician. How many times, how many, many times, have you and I seen a lamentable failure, the wreck of a noble career due to the lack of this one thing! Courage to be honest with one's self as well as with the patient; courage to face the inevitable; courage to see and to say *mea culpa*; furthermore, courage to place the blame when that is necessary; courage to hit another hard when justice and safety require it; perhaps courage to be poor and courage to be obscure; courage to remain simple in prosperity and unspoiled in success; this is the courage that goes to make a great physician! And Herrick has it, God bless him!

**ANNUAL MEETING OF THE ALUMNI ASSOCIATION OF
RUSH MEDICAL COLLEGE****Auditorium Hotel, June 11, 1924***Dr. B. W. Sippy, President, in the chair*

The report of the previous annual meeting was read and approved. Then followed the report of the secretary which was also approved.

Dr. Waugh presented the necrologist's report. Adopted.

Dr. Rinder read the treasurer's report, which was adopted. All of these reports will appear in the next number of the BULLETIN.

Dr. Fishbein reported through Dr. Coleman that the next number of the BULLETIN would soon appear with a report of the proceedings of the meeting.

No report was made by the committees in charge of the Dodson Lecture Fund and the Haines Library Fund. Dr. Holmes made a brief report for the entertainment committee.

Dr. Rhodes reported at some length on our relations with the alumni of the University of Chicago and outlined the changes necessary in our constitution to make it conform with the constitution of the Alumni Council of the University. He presented the following resolution which was adopted.

WHEREAS, Rush Medical College by organic union with the University of Chicago has now become Rush Medical College of the University of Chicago, and

WHEREAS, It now becomes desirable that the Alumni Association unite itself with the Alumni Council of the University thus insuring the perpetuation for all time of the Association as the Alumni Association of Rush Medical College of the University of Chicago, therefore

Resolved, That a committee of three be appointed by the President of the Association, who, together with the President, Secretary and Treasurer of the Association, shall draft a new constitution of the Rush Medical College Alumni of the University of Chicago, after careful study of the situation, with reference to its active union with the Alumni Council of the University of Chicago, and further

Resolved, That a copy of this newly formed Constitution be mailed to each active and life member of the Association, and

Resolved, That a special meeting of the Alumni Association be called during the summer or fall of 1924 for the adoption of the new constitution and to transact any business connected with the proposed union of the Association with the Alumni Council.

JOHN E. RHODES,
WILBUR E. POST,
KELLOGG SPEED,
Committee.

Dr. Coleman moved that the special committee on alumni relations of which Drs. Rhodes, Post and Speed are the present members be continued to prepare the new constitution and arrange for its adoption. Carried.

Dr. Sippy read a cordial invitation from the Alumni Council for us to become members of that body which is the general governing body of the separate alumni associations of the university.

The invitation included a request that pending final arrangements for our official reception into the Alumni Council three delegates be appointed to represent us in the council. These were appointed and will be listed with the officers elected for the ensuing year.

Dr. Rhodes moved that these delegates be appointed by the incoming president. This was passed but the action was later rescinded and the appointment was made by the acting president.

It was moved by Dr. Rinder that an honorarium of \$100 be given Miss Fox of the college for her valuable services to the Association during the past year. Carried.

Dr. Hayden moved that an honorarium of \$150 be paid Dr. Rinder for his excellent work as treasurer the past year. A motion by Dr. Holmes to lay on the table was lost. The original motion carried.

Dr. Coleman read two requests from the librarian, Miss McAuliff. The first one was for a book plate for the books of the library with an initial print of 25,000 copies. Passed.

The second was a request for photographs of all Rush men serving in the late war.

Dr. Billings spoke very feelingly regarding memorials to former members of our faculty who have died and suggested an annual endowment of \$5,000, be raised to honor these men whose influence moulded the minds of so many alumni whom they instructed. It was his plan that we thus recognize one member each year until a selected list is so remembered, the interest from each fund to be used for the good of the department in which such member best served.

The association shall by vote each year select the one to be remembered that year.

As several of the number are already recognized by special funds and other memorials their names are not included in this project.

The following list was suggested:

Moses Gunn

James Adams Allen

Charles P. Parkes

DeLaskie Miller

Edward Holmes

James H. Etheridge

Henry M. Lyman

Joseph Ross

From this number James Adams Allen was selected for the first.

This fund was started by Dr. Billings with Dr. Bridge a close second and Dr. B. W. Sippy a ready third.

Generous responses from numerous other alumni brought the immediate total up to over one-half of the amount needed.

Dr. A. A. Hayden moved that a committee of three be appointed to act upon the proposition of Dr. Billings and arrange for the carrying out of the plan. Passed.

Dr. Sippy presented a congratulatory resolution in honor of Dr. Billings which was unanimously adopted.

Then Dr. Post moved that we become a committee of the whole to make nominations from the floor for officers for the ensuing year. Carried.

The following members were nominated and elected as officers for the coming year.

President, ERNEST E. IRONS, '03, Chicago.

First Vice President, J. J. STOLL, '85, Chicago.

Second Vice President, FREDERICK A. SPEIK, '07, Los Angeles, Calif.

Third Vice President, E. E. CLAYTON, '97, Chicago.

Necrologist, J. F. WAUGH, '04, Chicago.

Treasurer, CARL O. RINDER, '13, Chicago.

Secretary, CHARLES A. PARKER, '91, Chicago.

Directors, three years, WILBUR E. POST, '03, Chicago, and JOHN E. RHODES, '86, Chicago.

Delegates to Alumni Council, RALPH C. BROWN, D. B. PHEMISTER and GEO. H. COLEMAN.

Adjourned.

CHAS. A. PARKER, Secretary.

Report of the Secretary

The past year has been one of great promise to our association. Within the last month Rush Medical College has become an integral part of the University of Chicago, its official title now being Rush Medical College of the University of Chicago, and as such it will continue to do the undergraduate work for a number of years or until proper facilities can be prepared for the work on the south side. And then it will continue as the Rush Postgraduate School so the identity will not be lost, a matter of filial pride and great satisfaction to its loyal alumni.

Of vital importance to the alumni association is the status in the new relation. This bids fair to being satisfactory as we have already received a cordial invitation to join the Alumni Council, the central governing body of the separate alumni associations of the university, in which we shall be represented by delegates elected from our body as soon as certain necessary changes are made in our constitution to enable us to qualify for entrance into the council. This central council represents all of the alumni and conducts all general activities. It publishes the alumni magazine, organizes local clubs ad conducts the annual reunion as well as cares for the alumni files and records.

For the proper consummation of this relation we have an active committee consisting of Drs. Rhodes, Post and Speed, who have been conferring with the officers of the council regarding the necessary steps to be taken to entitle us to the full benefits of the association. We hope to hear the results of their work today.

Throughout the year there has been a steady increase in the number of life memberships until now it is 237.

The last commencement in Old Rush was held in the upper amphitheater this afternoon and those alumni who were present felt for the last time the thrill that comes from sitting on those hallowed benches and resting the eyes on those classic walls that have resounded to the eloquence and reflected the glory of a memorable galaxy of stars of the first magnitude of whom we cannot refrain from mentioning a Gunn, an Allen, a Byford, a Parkes, a Knox, a Lyman, Jimmy Etheridge, a Bridge, a Senn, a Billings, a Bevan, a Herrick and a Sippy.

In a few days the capstone will be removed and the present structure leveled to the ground, whence the New Rush will rise phenix like from the ashes with all the traditions of the past as an inspiration and an augury for a glorious future. OLD RUSH, we are proud of you.

Report of the Necrologist for 1924, J. Frank Waugh

During the past year eighty-five members of our association have been taken from us by death. This list covers a period from the class of 1863 to 1920. The oldest member being Harrison W. Sigworth, Anamosa,

Iowa, class of 1863, aged 87, and the youngest, Clarence C. Smith, class of 1920, aged 34. Although each year's class adds materially to our membership the past year's list is about 20% less than the preceding year.

RECORD OF DEATHS

Harrison W. Sigworth, Anamosa, Iowa; Rush Medical College, Chicago, 1863; Civil War veteran; aged 87; died, March 29, of senility.

Charles Edward Steadman, Junction City, Kan.; Rush Medical College, Chicago, 1866; aged 80; died, February 1, of senility.

Edward B. Hobson, Rush Medical College, Chicago, 1867; aged 80; died, June 27, at Kansas City, Mo., of senility.

Amos Babcock, New Hampton, Iowa; Rush Medical College, Chicago, 1868; Civil War veteran; aged 78; died suddenly, August 23, of mitral regurgitation.

Arthur D. H. Thrane, Eau Claire, Wis.; Rush Medical College, Chicago, 1868; member of the State Medical Society of Wisconsin; aged 79; died, June 15, at the Sacred Heart Hospital, of senility.

John A. M. Gibbs, Cairo, Ill.; Rush Medical College, Chicago, 1868; member of the Illinois State Medical Society; formerly member of the school board; aged 80; died, May 6, following a long illness.

Oliver Gard, Frankfort, Ind.; Rush Medical College, Chicago, 1869; Civil War veteran; formerly mayor of Frankfort; aged 81; died, July 19, at the Methodist Episcopal Hospital, Indianapolis.

Adam Ewing Miller, Jerseyville, Ill.; Rush Medical College, Chicago, 1869; aged 85; died, Dec. 22, 1923, of heart disease.

Leonard P. Woodworth, Little Rock, Ark.; Rush Medical College, Chicago, 1870; Civil War veteran; aged 84; died, December 9, of senility.

Charles D. Roeme, Cresco, Iowa; Rush Medical College, Chicago, 1871; aged 79; died, May 31, of senility.

Albert Palmer Peck, Berkeley, Calif.; Rush Medical College, Chicago, 1871; aged 75; died, June 14.

George E. Newell, Burlington, Wis.; Rush Medical College, Chicago, 1871; aged 73; died, June 22, of cerebral hemorrhage.

Charles Theodore Cory, Harriman, Tenn.; Rush Medical College, Chicago, 1872; aged 76; died, January 9, at Chattanooga, of senility.

Lewis Cass Hormell, Casselton, N. D.; Rush Medical College, Chicago, 1874; Civil War veteran; aged 76; died, May 8, in Chicago, on his way home from Florida.

John Drake Mandeville, Champaign, Ill.; Rush Medical College, Chicago, 1875; member of the Illinois State Medical Society; Civil War veteran; aged 80; died, April 14, of senility.

Samuel S. Weidner, Fairbury, Neb.; Rush Medical College, Chicago, 1875; aged 75; died, May 1, at Clarinda, Iowa.

Olin Joseph Lawry, Redding, Calif.; Rush Medical College, Chicago, 1875; Civil War veteran; at one time mayor of Redding; aged 79; died, November 6, of senility.

James Henry Plecker, Chicago; Rush Medical College, Chicago, 1877; Civil War veteran; aged 82; died, March 11, of carcinoma of the ear.

Herbert Roderick Bird • Madison, Wis.; Rush Medical College, Chicago, 1877; Civil War veteran; aged 74; died, June 25, at a sanatorium in Waukesha, of heart disease.

Abra C. Pettijohn ♦ St. Joseph, Mo.; Rush Medical College, Chicago, 1878; member of the American Psychiatric Association; aged 74; died, April 5, at Long Beach, Calif., of senility.

Byron Benjamin Godfrey ♦ Holland, Mich.; Rush Medical College, Chicago, 1878; health officer of Holland; aged 76; died, May 6, following a long illness.

Alfred H. Hinde, Ocean Beach, Calif.; Rush Medical College, Chicago, 1878; formerly a practitioner in Chicago; aged 71; died, November 14.

Hortense Lowry Isherwood, Carl Junction, Mo.; Rush Medical College, Chicago, 1878; president of the Citizens' Bank of Carl Junction; formerly mayor; aged 74; was killed, March 17, when the automobile in which he was driving was struck by a train.

Frederick Charles Werner, Watertown, Wis.; Rush Medical College, Chicago, 1879; also a pharmacist; for many years member of the city council, and board of education; aged 66; died, January 11, of cerebral hemorrhage.

Thomas Benton Francis, Palo Alto, Calif.; Rush Medical College, Chicago, 1879; formerly a practitioner in Minnesota; aged 68; died recently.

Harold Nicholas Moyer ♦ Chicago; Rush Medical College, Chicago, 1879; died, December 14, of heart disease. Dr. Moyer was born in Canajoharie, N. Y., in 1858; from 1886 to 1903, he served on the faculty of Rush Medical College as an assistant in diseases of the nervous system, lecturer in physiology and histology, adjunct professor of medicine, assistant to the neurologic clinic and assistant professor of medicine. He was a member of the House of Delegates of the American Medical Association, from 1902 to 1904, and a member of the Reference Committee on Credentials of the House of Delegates in 1904. He was formerly president of the Illinois State Medical Society and the Chicago Medical Society, was a member of the Chicago Neurological Society, the Chicago Pathological and the American Neurological Association. He was at different times on the staff of the Cook County, the Columbus, St. Luke's, and the Mercy hospitals of Chicago, and the Eastern Hospital for the Insane, Kankakee, Ill. Dr. Moyer was widely known as a medico-legal adviser. He was a man of genial character with numerous friends.

Addison Coffea James, Springfield, Ill.; Rush Medical College, Chicago, 1880; also a druggist; aged 70; died, January 13.

Milton Van Dyke, Seattle; Rush Medical College, Chicago, 1880; aged 72; died in December.

Ezekiel Price Murdock, Chicago; Rush Medical College, Chicago, 1880; Civil War veteran; formerly superintendent of schools in Streator, Ill., Shelbyville, Ill., and Memphis, Mo.; aged 78; died, November 14.

Herman Reineking ♦ Milwaukee; Rush Medical College, Chicago, 1880; University of Heidelberg, Germany, 1886; associate professor of surgery at the Wisconsin College of Physicians and Surgeons and the Marquette University School of Medicine, Milwaukee; on the staff of the Milwaukee County Hospital, and former president of the Wisconsin State Medical Society; aged 67; died, January 21.

Siremba Shaw, Chicago; Rush Medical College, Chicago, 1882; aged 73; died, April 17, of paralysis.

Ben Barret Griffith ♦ Springfield, Ill.; Rush Medical College, Chicago, 1882; Medical Department of Columbia College, New York, 1885; formerly on the staff of St. John's Hospital; for fourteen years member of the city board of health; aged 62; died, October 6, at Colorado Springs, Colo.

Joseph Turner Steele, Hastings, Neb.; Rush Medical College, Chicago, 1883; member of the Nebraska State Medical Association; formerly

superintendent of the Nebraska State Hospital, Ingleside; died, May 25, at Rochester, Minn., following an operation.

John Hunter Adair ♦ Owatonna, Minn.; Rush Medical College, Chicago, 1883; aged 65; died, January 6, of tumor of the brain.

Charles Worth Talbott ♦ Lake Villa, Ill.; Rush Medical College, Chicago, 1883; aged 72; died, Dec. 26, 1923, of chronic nephritis.

Webster Coleman Smith, Franklin Grove, Ill.; Rush Medical College, Chicago, 1885; aged 82; died, December 6, of senility.

Thomas Edward Beard, Portland, Ore.; Rush Medical College, Chicago, 1886; had retired from the practice of medicine to become a florist; aged 63; died, Dec. 17, 1923.

Charles Putnam Pruyn, Chicago; Rush Medical College, Chicago, 1886; founder, and at one time professor of operative dentistry, Northwestern University Dental School; past president of the Illinois Board of Dental Examiners; aged 68; died, June 10, of paralysis agitans.

Lincoln P. Parkhurst, Grand Rapids, Mich.; Rush Medical College, Chicago, 1886; member of the Michigan State Medical Society; aged 58; died, November 3, following a long illness.

Samuel Ingelby Harrison, San Francisco; Rush Medical College, Chicago, 1887; member of the California Medical Association; aged 65; died, January 6, of aortic insufficiency.

Albert Stevens Cunningham, Goldfield, Iowa; Rush Medical College, Chicago, 1889; member of the Iowa State Medical Society; served in the M. C., U. S. Army, during the World War, with the rank of captain; aged 68; died, May 25.

John Franklin Sanders ♦ Blytheville, Ark.; Rush Medical College, Chicago, 1889; for ten years city health officer; on the staff of the Blytheville General Hospital; aged 60; died, Dec. 27, 1923, of cerebral hemorrhage.

Arastus Vernon Elliott, Beresford, S. D.; Rush Medical College, Chicago, 1889; aged 58; died suddenly, June 8, of heart disease.

William Eugene Putnam ♦ Whiting, Ind.; Rush Medical College, Chicago, 1889; aged 62; died suddenly, November 19.

Frank B. Bressler, Oak Park, Ill.; Rush Medical College, Chicago, 1889; aged 59; died, July 30, of heart disease.

John Christopher Foley ♦ Waukegan, Ill.; Rush Medical College, Chicago, 1890; for twelve years health commissioner of Waukegan; aged 60; died, January 22, at Miami Beach, Fla., following a long illness.

George Albert Carson, Mount Vernon, Iowa; Rush Medical College, Chicago, 1890; aged 59; died, July 23, of a self-inflicted bullet wound in his brain, while suffering from ill health.

Erich Benno Ruthenberg, Chicago; Rush Medical College, Chicago, 1890; on the staff of the Passavant Hospital; aged 53; died, March 10, of angina pectoris.

Guido Ranniger, Oscuro, N. M.; Rush Medical College, Chicago, 1890; aged 69; died, August 17, at the Masonic Hospital, El Paso, following an operation on the gallbladder.

Henry George Rawers, Chickasaw, Ohio; Rush Medical College, Chicago, 1891; member of the Ohio State Medical Association; aged 57; died, April 4, of heart disease.

Walter John Brown ♦ Danville, Ill.; Rush Medical College, Chicago, 1891; aged 56; died, May 8, of septicemia.

William Weaver Hartman ♦ Chicago; Rush Medical College, Chicago, 1892; aged 57, died, May 2, of heart disease.

George McKenzie ♦ Reno, Nev.; Rush Medical College, Chicago, 1893; served in the M. C., U. S. Army, during the World War with the rank of captain; aged 52; died, February 4, of cirrhosis of the liver.

Thomas J. Creel ♦ Angola, Ind.; Rush Medical College, Chicago, 1893; formerly mayor of Angola; aged 55; died suddenly, in December, of thrombosis.

D. Edmund Smith, Minneapolis; Rush Medical College, Chicago, 1894; served with the American Red Cross, in France, during the World War; aged 56; died, Dec. 15, 1923, following a long illness.

Bader S. Hunt ♦ Winchester, Ind.; Rush Medical College, Chicago, 1894; county coroner; formerly on the staff of the Read Memorial Hospital, Richmond; aged 55; died, March 23.

Edwin Rossiter Mulford, La Crosse, Wis.; Rush Medical College, Chicago, 1895; aged 58; died, October 12, of pernicious anemia.

Theodore Byron Wood, Chicago; Rush Medical College, Chicago, 1895; member of the Illinois State Medical Society; aged 53; died, August 2, of cerebral hemorrhage.

Henry Clay Gemmill, Hartford, Conn.; Rush Medical College, Chicago, 1896; formerly demonstrator of histology at the Indiana Medical College, Indianapolis; veteran of the Spanish-American and World wars; formerly surgeon in the U. S. Public Health Service and the Veterans' Bureau; aged 49; died suddenly, January 10, of angina pectoris.

George Henry Hansen ♦ Chicago; Rush Medical College, Chicago, 1896; specialized in otology, laryngology and rhinology; aged 60; died, February 11, at Beloit, Wis., of pneumonia.

James David Don Trumbauer, Ohio, Ill.; Rush Medical College, Chicago, 1897; aged 48; died, November 5, at the People's Hospital, Peru of a self-inflicted bullet wound, while suffering from ill health.

Ezra Read Larned ♦ Detroit; Rush Medical College, Chicago, 1897; aged 55; died suddenly, July 3, of heart disease.

George McClellan Billmeyer, Zion, Ill.; Rush Medical College, Chicago, 1897; member of the Illinois State Medical Society; aged 61; died, May 15, of cerebral hemorrhage.

Alfred Ernest Smolt ♦ Newton, Kan.; Rush Medical College, Chicago, 1897; aged 52; died, June 2, at a hospital in Kansas City, Mo., following a long illness.

Joseph Paul Stoye ♦ Theresa, Wis.; Rush Medical College, Chicago, 1897; aged 55; died suddenly, October 26, of heart disease, while attending a patient.

Wilson A. Foskett, White Bird, Idaho; Rush Medical College, Chicago, 1897; member of the Idaho State Medical Association; aged 54; was drowned, April 14, when the automobile in which he was driving plunged into the river.

Elmer Fessler, Thompson Falls, Mont.; Rush Medical College, Chicago, 1900; aged 51; died, April 7, of a self-inflicted bullet wound, while suffering from ill health.

David Edward Broderick, Wichita, Kan.; Rush Medical College, Chicago, 1901; aged 43; died, November 14, following a long illness.

Frederick Alfred Fisher ♦ Chicago; Rush Medical College, Chicago, 1901; veteran of the Spanish-American and World wars; on the staffs of the Alexian Brothers' Hospital and of the Illinois Masonic Hospital, where he died, May 3, of heart disease.

Charles Bernard Rentz, Sanborn, Iowa; Rush Medical College, Chicago, 1901; served with the M. C., U. S. Army, in France during the World

War; aged 45; died recently at the government sanatorium, Springfield, Ill., of tuberculosis.

Edward John Kieffer ♦ Chicago; Rush Medical College, Chicago, 1902; aged 44; died, March 14.

Benjamin Harry Southworth, Schoolcraft, Mich.; Rush Medical College, Chicago, 1903; aged 45; died, January 3, of diabetes mellitus.

Ralph Elliott Rugh ♦ Racine, Wis.; Rush Medical College, Chicago, 1903; formerly on the staff of the Lake Geneva (Wis.) Sanitarium; aged 48; died, October 28, of cerebral hemorrhage.

Lashbrook Bryceon Laker ♦ Eureka, Utah; Rush Medical College, Chicago, 1903; aged 49; died, February 7, in a hospital at Salt Lake City.

Leon Jacobs ♦ Yuma, Ariz.; Rush Medical College, Chicago, 1903; physician to the Fort Yuma Indian School; served in the M. C., U. S. Army, during the World War; aged 46; died, May 4, of injuries received in an accident.

Rodney E. Troutman, Logansport, Ind.; Rush Medical College, Chicago, 1904; member of the Indiana State Medical Association; aged 42; died, April 22.

Walter D. Fischer ♦ Chicago; Rush Medical College, Chicago, 1904; aged 44; died, September 7, of acute bronchitis and chronic myocarditis.

Otto Gustav Wickerski ♦ San Diego, Calif.; Rush Medical College, Chicago, 1904; formerly county health officer; medical director of the San Diego County General Hospital, where he died, January 2, of typhoid fever, aged 47.

Maria Blair Maver, Chicago; Rush Medical College, Chicago, 1906; associated with Dr. Howard T. Ricketts in his work on Rocky Mountain spotted fever; aged 60; died, April 1, at the Presbyterian Hospital, of hyperthyroidism and bronchopneumonia.

Charles Stuart Menzies ♦ Portland, Ore.; Rush Medical College, Chicago, 1909; served in the M. C., U. S. Army, during the World War; aged 38; died, September 13, of chronic nephritis.

Harrison Ross Rogers, Rockford, Ill.; Rush Medical College, Chicago, 1909; served in the M. C., U. S. Army, during the World War, with the rank of lieutenant; aged 38; died, May 30, of acute nephritis and pneumonia.

Clarence Axtell Penman ♦ Beaumont, Texas; Rush Medical College, Chicago, 1910; aged 38; was killed by an unknown assailant, July 25.

Charles Lewis Gotham ♦ St. Paul; Rush Medical College, Chicago, 1911; on the staff of the St. Paul Hospital; aged 58; died, April 28.

Walter Fritz Winholt ♦ Chicago; Rush Medical College, Chicago, 1913; member of the Chicago Pediatric Society; assistant professor of medicine and pediatrics at his alma mater; medical director of the Chicago Infant Welfare Society; served in the M. C., U. S. Army, during the World War; on the staffs of the Cook County Hospital and the Presbyterian Hospital, where he died, December 9, of chronic nephritis and heart disease; aged 35.

Clarence C. Smith, Burbank, Okla.; Rush Medical College, Chicago, 1920; member of the Oklahoma State Medical Association; aged 34; was found dead in his office, October 19.

CORRESPONDENCE

CLASS OF '89 AIDS HAINES LIBRARY FUND

To the Editor:—At the 35th anniversary of the Class of '89, those present determined to express their respect for the memory of Prof. Walter S. Haines by contributing as a class to the Walter S. Haines Library Fund. Accordingly \$130.00 has been contributed by the following members:

Chas. E. Albright, A. W. Baer, Hayden S. Barnard, Carl M. Beebe, Jos. Z. Bergeron, F. S. J. Bessette, E. J. Cole, E. B. Coolley, Willis R. Congdon, J. W. Daniels, Garrett Fitzgibbon, S. Greenspahn, P. B. Hayes, Eugene Krohn, Wm. H. Lane, John J. Looze, John R. Minahan, I. D. Mishoff, Henry A. Norden, E. Perry Rice, John R. Roark, Herbert A. Robinson, W. P. Sherman, Harvey A. Tyler, G. H. Weaver, A. G. Wernicke and R. L. Nourse.

GEORGE H. WEAVER, M.D., Chicago.

REQUESTS FOR SOUVENIRS

To the Editor:—The bulletin for March reached me today and the notice to secure souvenirs of the old building of Rush Medical College has flooded my memory with visions of the laying of the corner stone under Masonic ceremonies and the remarkable address delivered at that time by Uncle Allen. We students from the south side, 18th and Arnold Street were very proud to be invited to be present and for some years I treasured some of the corn used at the ceremony. Now the structure is to be torn down and I am particularly interested in the memorial window which adorns the old building just above the entrance. In the Bulletin in 1908, I called attention to the fact that perhaps few knew what the names in the window stood for and perhaps the few who did know have passed to the Great Beyond. I therefore repeat: After the great fire, when Rush was burned out and finances very scarce there were established perpetual scholarships for those who would donate \$500.00 or more with which to build the old shack under the side walk at 18th and Arnold St. and this window gives the names of those who came to the aid of Rush at that time. Dr. Higday was my preceptor and uncle and I feel that it is due to these men that the memorial window should be in some way incorporated in the new Rush.

Will you please let me know what steps could be taken to secure this?

J. H. W. MEYER, M.D., La Porte, Ind.

To the Editor:—Replying to yours of April 3rd concerning some souvenir of the old Rush Medical Building, will say that I had not thought of anything in particular. A stair-rail or something that was prominent in the arena of the upper lecture room, or anything else which you might select would be satisfactory to me.

W. W. GREGORY, M.D., Stevens Point, Wis.

To the Editor:—I would like if possible the stone on the column at the front door and a piece of the hand rail on the stair.

J. M. NICHOLSON, M.D., Chicago.

RUSH ALUMNI LUNCHEON

To the Editor:—During the recent Illinois State Medical Society meeting at Springfield the Rush Alumni held a most enthusiastic luncheon, served in courses, and attended by fifty-five graduates of "old Rush." The meeting was doubly entertaining under the able presidency of E. H. Ochsner, who stimulated each alumnus present to rise and give an account of himself and, pardon us, herself. Special speakers were Dr. Wills of '69, Dr. Kaufman of '75 and Drs. Britton, Coolie and Murphy. The following were present:

J. S. Kaufman, Blue Island, '75
T. D. Cantrell, Bloomington, '88
George A. Dicus, Streator, '90
A. R. Trapp, Springfield, '01
C. E. Scullin, Peoria, '03
John J. McShane, Springfield, '03
F. O. Fredrichson, Chicago, '08
David Straus, Chicago, '07
S. H. Easton, Peoria, '13
R. I. Herndon, Springfield, '14
John Martin, Tolona, '97
E. S. Murphy, Dixon, '97
Florence Ames, Normal, '21
J. H. Truelove, Bloomington, '89
John E. Tuites, Rockford, '00
John R. Tobin, Elgin,
S. J. McNull, Chicago, '03
M. L. Blatt, Chicago, '03
John R. Harger, Chicago, '06
R. R. Ferguson, Chicago, '06
E. D. Wise, Champaign, '14
M. D. Pollock, Decatur, '95
J. R. Baumger, '00
E. R. Coolery, '89
Charles D. Center, '94
Edward Bowe, '97
J. R. Merriman, '18

William H. Maley, '97
Beck Herdman, '09
J. H. Twilon, Bloomington, '89
L. J. Hughes, Elgin, '02
H. G. G. Schmidt, Elgin, '96
T. F. Hill, Athens, '96
R. L. Benjamin, St. Anne, '02
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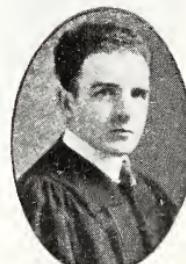
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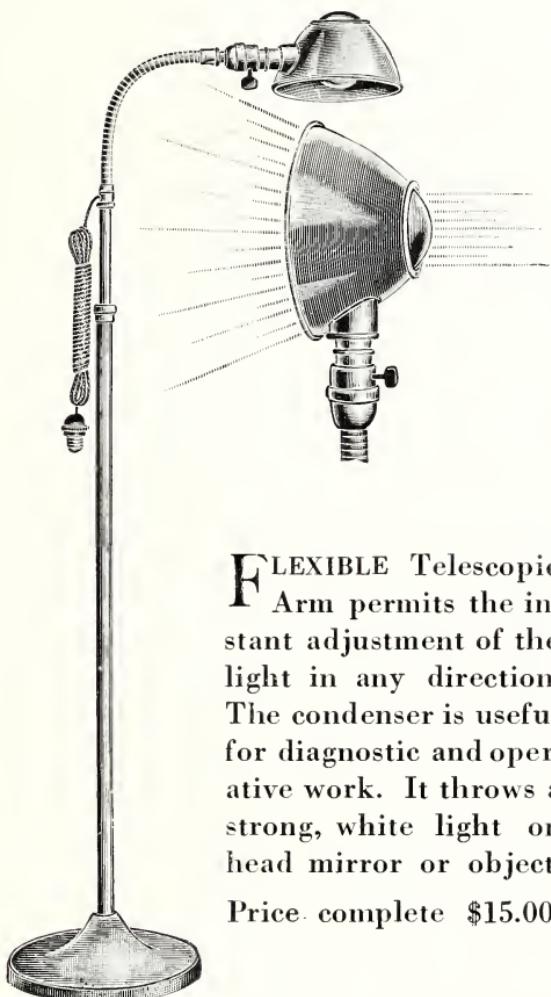
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